2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

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1. Entity Name
OSBORNE & OSBORNE, P.A.

Principal Place of Business
798 S. FEDERAL HWY
SUITE 100
BOCA RATON, FL 33432

Mailing Address
P.O. DRAWER 40
BOCA RATON, FL 33429-9974

01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0455254
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

OSBORNE, BRADY R JR
798 S. FEDERAL HWY
STE. #100
BOCA RATON, FL 33432

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7. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000397209
01/30/06-90040-018 150.00

OFFICERS AND DIRECTORS

TITLE	VPD
NAME	OSBORNE, RAY C
STREET ADDRESS	798 S. FEDERAL HWY #100
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	DP
NAME	OSBORNE, BRADY R JR
STREET ADDRESS	798 S. FEDERAH HWY STE. #100
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	S
NAME	JONES, WENDY H
STREET ADDRESS	798 S FED HWY
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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10. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wendy H. Jones 1/19/06 561-338-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #