


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED  
Apr 14, 2006 08:00 AM  
Secretary of State**

DOCUMENT # P94000000123  
1. Entity Name  
GEORGE P. ORD, P.A.



Principal Place of Business      Mailing Address  
340 ROYAL PALM WAY      340 ROYAL PALM WAY  
PALM BEACH, FL 33480      PALM BEACH, FL 33480

**DO NOT WRITE IN THIS SPACE**



04072006    No Chg-P    CR2E034 (11/05)

4. FEI Number 65-0459940	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
  
ORD, GEORGE P  
340 ROYAL PALM WAY  
STE 100  
PALM BEACH, FL 33480

**DO NOT WRITE  
IN THIS SPACE**

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

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

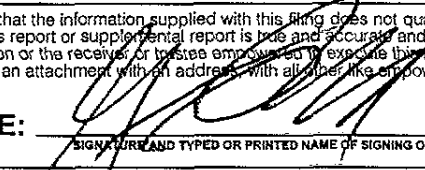
9. Election Campaign Financing  
Trust Fund Contribution.        **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ORD, GEORGE P 340 ROYAL PALM WAY PALM BEACH, FL 33480
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U00000509890  
04/28/06-80062-010 150.00

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IN THIS SPACE**

12. 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:       4/17/06      386-655-4060  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #