## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNAPURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 04, 2008 08:00 Al Secretary of State

DOCUMENT	# P94000046811
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Entity Name

GREGG S. LERMAN, P.A.



Principal Place of Business

330 CLEMATIS STREET

209

WEST PALM BEACH, FL 33401 U

Mailing Address

330 CLEMATIS STREET

SUITE #209

WEST PPALM BEACH, FL 33401



01172008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0495895

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LERMAN, GREEG S. 330 CLEMATIS STREET, SUITE #209 WEST PALM BEACH, FL 33401

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. The above named entity sebmits 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						
Signature, type of printed name of registered agent and bitle if applicable (NOTE Registered Agent signature required when reinstating) 비미미미미의 전투다도						
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fin     Trust Fund Contribution		\$5.00 May Be Added to Fees	02/14/08-80029-003 150.00	
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS LERMAN, GREGG S 330 CLEMATIS STREET, SUITE 209 WEST PALM BEACH, FL 33401					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LERMAN, DEBRA 330 CLEMATIS STREET #209 WEST PALM BEACH, FL 33401					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>1</sup>	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·					
TITLE NAME STREET ADDRESS CITY ST-ZIP						
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 supplied enter the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied enter the exemption of the corporation or the receiver of 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 addition, with all other like empowered.						