2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000049317 1. Entity Name ALAN S. ZANGEN, P.A.



Principal Place of Business

1200 CORPORATE CENTER WAY SUITE 201

WELLINGTON, FL 33414 US

Mailing Address

1200 CORPORATE CENTER WAY SUITE 201

WELLINGTON, FL 33414 US

FILED Apr 03, 2006 08:00 AM Secretary of State



03302006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0505317 | Applied For | | Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

561-793-2400

6. Name and Address of Current Registered Agent

ZANGEN, ALAN S ESQ. 1200 CORPORATE CENTER WAY SUITE 201 WELLINGTON, FL 33414

CITY-ST-ZIP

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the places of registered agent	urpose of changing its registered	office or r	registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or ponted name of registered agent and title if	applicable, (NOTE Registered /	lgent signature	gritter remains a required when remaining	DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.				\$5.00 May Be	
10. OFFICERS AND DIRECTORS					
TRLE NAME STREET ADDRESS CATY-ST-ZAP	P ZANGEN, ALAN S ESQ. 1200 CORPORATE CENTER WAY, SU WELLINGTON, FL	JITE 201			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
THELE NAME STREET ADDRESS GITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STRECT ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CUTY-ST-ZIP					・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutés. I further certify that the information indicated on this report or suppliemental 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.