2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000070115

Entity Name: ALLEN, LANG, CARPENTER & PEED, P.A.

FILED Apr 04, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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108 E. HILLCREST STREET
ORLANDO, FL 32801 US
108 EAST HILLCREST STREET
ORLANDO, FL 32801 US

Current Mailing Address: New Mailing Address:

108 E. HILLCREST STREET
ORLANDO, FL 32801 US

108 EAST HILLCREST STREET
ORLANDO, FL 32801 US

108 EAST HILLCREST STREET
ORLANDO, FL 32801 US

FEI Number: 59-3267914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALLEN, THOMAS R

108 E. HILLCREST STREET
ORLANDO, FL 32801 US

ALLEN, THOMAS R

108 EAST HILLCREST STREET
ORLANDO, FL 32801 US

ORLANDO, FL 32801 US

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.

SIGNATURE: 04/04/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: LANG, THOMAS F Name: ALLEN, THOMAS R

Address: 14 E WASHINGTON ST SUITE 600 Address: 108 EAST HILLCREST STREET

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

Title: VD () Delete Title: () Change () Addition Name: ALLEN. THOMAS R Name:

Address: 108 E. HILLCREST STREET Address: City-St-Zip: ORLANDO, FL 32801 US City-St-Zip:

Name: PEED, FRED M Name: ALLEN, THOMAS R

Address: 14 E WASHINGTON ST STE 600 Address: 108 EAST HILLCREST STREET

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

Title: TD () Delete Title: SD (X) Change () Addition

Name: CUROTTO, DONALD Name: ALLEN, THOMAS R

Address: 14 E WASHINGTON ST STE-600 Address: 108 EAST HILLCREST STREET

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS R. ALLEN D 04/04/2007