2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000081473

1. Entity Name
T. HULEN RAY, P.A.

Principal Place of Business	Mailing Address
216 W. HOWRY AVE. DELAND, FL 32720 US	216 W. HOWRY AVE. DELAND, FL 32720 US

DO NOT WRITE IN THIS SPACE

01032006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3278453	Not Applicable

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

6. Name and Address of Current Registered Agent

RAY, T. HULEN
216 W. HOWRY AVE.
DELAND, FL 32720

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 _____

Signature, typed or printed name of registered agent and title if applicable   (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	PVTS
NAME	RAY, T H
STREET ADDRESS	216 WEST HOWRY AVENUE
CITY-ST-ZIP	DELAND, FL

U00000521048
05/02/06-80119-011 150.00

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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: _T. Hulen Ray_ / T. Hulen Ray   April 18, 2006   386-734-2606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #