

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000025318

FILED  
Sep 12, 2007  
Secretary of State

Entity Name: SONN AND ASSOCIATES, P.A.

## Current Principal Place of Business:

ONE FINANCIAL PLAZA  
1500  
FT LAUDERDALE, FL 33394 US

## Current Mailing Address:

ONE FINANCIAL PLAZA  
1500  
FT. LAUDERDALE, FL 33394

## New Principal Place of Business:

BROWARD FINANCIAL CENTER  
1600  
FT LAUDERDALE, FL 33394 US

## New Mailing Address:

BROWARD FINANCIAL CENTER SUITE 1600  
FORT LAUDERDALE, FL 33394

FEI Number: 65-0569514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SONN, JEFFREY  
ONE FINANCIAL PLAZA  
1500  
FT LAUDERDALE, FL 33394 US

## Name and Address of New Registered Agent:

SONN, JEFFREY  
BROWARD FINANCIAL PLAZA  
1600  
FT LAUDERDALE, FL 33394 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: JEFFREY R. SONN

09/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: SONN, JEFFREY  
Address: ONE FINANCIAL PLAZA, SUITE 1500  
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: DVP ( ) Delete  
Name: SONN, TERRI G  
Address: ONE FINANCIAL PLAZA, SUITE 1500  
City-St-Zip: FORT LAUDERDALE, FL 33394

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: SONN, JEFFREY  
Address: BROWARD FINANCIAL CENTER SUITE 1600  
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: DVP (X) Change ( ) Addition  
Name: SONN, TERRI G  
Address: BROWARD FINANCIAL CENTER, SUITE 1600  
City-St-Zip: FORT LAUDERDALE, FL 33394

I hereby certify that the information supplied with this filing does not qualify 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: JEFFREY R. SONN

P

09/12/2007

Electronic Signature of Signing Officer or Director

Date