## 2006 FOR PROFIT CORPORATION

## **FILED** ANNUAL REPORT May 01, 2006 08:00 Al DOCUMENT # P95000039128 **Secretary of State** SRY PROFESSIONAL FUNDRAISING, INC. Principal Place of Business Mailing Address 1412 SOUTHWEST 15TH AVENUE 1412 SOUTHWEST 15TH AVENUE FORT LAUDERDALE, FL 33312 FORT LAUDERDALE, FL 33312 04252006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0589134 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent YEZBICK, SUSAN DO NOT WRITE 1412 SW 15 AVE FT LAUDERDALE, FL 33312 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. Screekee, lyned or printed name of recestored agent and bile of explicable (NOTE: Registered Apent someture reguled when reinstating) DATE UD0000545059 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. 05/11/06-80062-008 150.00 Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PTD TITLE YEZBICK, SUSAN R NAME STREET ADDRESS 1412 SOUTHWEST 15TH AVENUE CITY-ST-7IP FORT LAUDERDALE, FL 33312 MLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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 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 507, 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:

NRE NAME STREET ADDRESS CITY-ST-ZIP