2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000087418

Entity Name: TRANS-SAM OF VERO BEACH, INC.

FILED Jan 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1701 HIGHWAY A-1-A, 1701 HIGHWAY A-1-A,

SUITE 202 VERO BEACH, FL 32963 US VERO BEACH, FL 32963 US

Current Mailing Address: New Mailing Address:

1701 HIGHWAY A-1-A, 1701 HIGHWAY A-1-A,

SUITE 202 VERO BEACH, FL 32963 US VERO BEACH, FL 32963 US

FEI Number: 59-3348866 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:

DELAPLANE, EARNEST E

1701 HIGHWAY A-1-A

SUITE 202

DELAPLANE, EARNEST E

1701 HIGHWAY A-1-A

VERO REACH EL 32963 LIS

SUITE 202 VERO BEACH, FL 32963 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: 01/11/2007

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: DELAPLANE, EARNEST EDWARD Name: DELAPLANE, EARNEST E

Address: 1701 A1A STE 202 Address: 1701 A1A

City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963

Title: STD () Delete Title: STD (X) Change () Addition
Name: DELAPLANE PAULA ANN
Name: DELAPLANE PAULA ANN

Name: DELAPLANE, PAULA ANN Address: 1701 A1A STE 202 Address: 1701 A1A

City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963

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: EARNEST E. DELAPLANE PD 01/11/2007