


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90148 019 ***150.00

DOCUMENT # P95000094560 1. Entity Name FRANK D. BUTLER, P.A.																													
Principal Place of Business 8250 BRYAN DAIRY RD 110 SEMINOLE, FL 33777 US			Mailing Address 8250 BRYAN DAIRY RD 110 SEMINOLE, FL 33777 US																										
2. Principal Place of Business 10550 US Hwy 19 N. Suite, Apt. #, etc.		3. Mailing Address 10550 US Hwy 19 N. Suite, Apt. #, etc.																											
City & State Pinellas Park, FL Zip 33782 Country USA		City & State Pinellas Park, FL Zip 33782 Country USA		4. FEI Number 59-3367433																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent BULTER, FRANK D ESQ 8250 BRYAN DAIRY RD STE 110 SEMINOLE, FL 33777			7. Name and Address of New Registered Agent Name Frank D. Butler, Esq Street Address (P.O. Box Number is Not Acceptable) 10550 US Hwy 19 N. City Pinellas Park FL Zip Code 33782																										
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 <u><i>Frank D. Butler</i></u> DATE <u>3/27/06</u> <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">D</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BUTLER, FRANK D</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8250 BRYAN DAIRY RD STE 110</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>SEMINOLE, FL 33777</td> <td></td> </tr> </table>			TITLE	D	<input type="checkbox"/> Delete	NAME	BUTLER, FRANK D		STREET ADDRESS	8250 BRYAN DAIRY RD STE 110		CITY-ST-ZIP	SEMINOLE, FL 33777		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">D</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Butler, Frank D</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>10550 US Hwy 19 N.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Pinellas Park, FL 33782</td> <td></td> </tr> </table>			TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Butler, Frank D		STREET ADDRESS	10550 US Hwy 19 N.		CITY-ST-ZIP	Pinellas Park, FL 33782	
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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: <u><i>Frank D. Butler</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>3/27/06</u> Daytime Phone # <u>727-399-2222</u>																									