


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2008 8:00 am
Secretary of State

07-30-2008 90029 048 ***150.00

DOCUMENT # P96000020452

1. Entity Name
 BELL, ROPER & KOHLMYER, P.A.



Principal Place of Business
 2816 E ROBINSON ST
 ORLANDO, FL 32803 US


Mailing Address
 2816 E ROBINSON ST
 ORLANDO, FL 32803 US

2. Principal Place of Business - No P.O. Box #
 2707 E. Jefferson St.
 Suite, Apt. #, etc.

3. Mailing Address
 2707 E. Jefferson St.
 Suite, Apt. #, etc.

City & State
 Orlando FL
 Zip Country
 32803 Orange

City & State
 Orlando, FL
 Zip Country
 32803 Orange



07022008 Chg-P CR2E034 (12/06)

4. FEI Number
 59-3361236

5. Certificate of Status Desired \$8.75 Additional Fee Required

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 BELL, MICHAEL M
 2816 EAST ROBINSON STREET
 ORLANDO, FL 32803

7. Name and Address of New Registered Agent
 Name: Michael M. Bell
 Street Address (P.O. Box Number is Not Acceptable):
 2707 E. Jefferson St.
 City: Orlando FL Zip Code: 32803

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]* DATE: 7-25-08

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BELL, MICHAEL 2816 EAST ROBINSON STREET ORLANDO, FL 32803 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROPER, MICHAEL J 2816 EAST ROBINSON STREET ORLANDO, FL 32803 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Michael M Bell 2707 E. Jefferson St. Orlando, FL 32803 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Michael J. Roper 2707 E. Jefferson St. Orlando, FL 32803 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Ernest H. Kohlmyer 2707 E. Jefferson St. Orlando, FL 32803 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* DATE: 7-25-08