05/02/2007 3:16 PM Jon Naglich 813-962-2653

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Secretary of State

06-15-2007 90022 017 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000041541

1. Entity Name
JUDY G. MOUKAZIS & ASSOCIATES, INC.

40120884

Principal Place of Business	Mailing Address
~~7218 MASSACHUSETTS AVE~~	~~7218 MASSACHUSETTS AVE~~
~~NEW PORT RICHEY, FL 34653~~	~~NEW PORT RICHEY, FL 34653~~
8624 GoverNment Dr STE 102 New Port Richey Fla 34654	SAME AS Below

05022007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8624 GoverNment DR	8624 GoverNment DR
Suite, Apt. #, etc. STe 102	Suite, Apt. #, etc. Suite 102
City & State New PortRichey FlA	City & State New Port Richey, FlA
Zip 34654 Country USA	Zip 34654 Country USA

4. FEI Number 59-3383665 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOUKAZIS, JUDY G
7530 LITTLE ROAD
CORUT REPORTERS ANNEX
NEW PORT RICHEY, FL 34654

7. Name and Address of New Registered Agent

Name MoukAzis, Judy G.
Street Address (P.O. Box Number is Not Acceptable) 8624 GoverNment Drive
Suite 102
City New Port Richey FL Zip Code 34654

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 ________________________________ ~~5-8-07~~
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 14, 2007

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D ☐ Delete	TITLE	☒ Change ☒ Addition
NAME	MOUKAZIS, JUDY G	NAME	MoukAzis, Judy G.
STREET ADDRESS	7218 MASSACHUSETTS AVENUE	STREET ADDRESS	8624 GoverNment Dr Suite 102
CITY-ST-ZIP	NEW PORT RICHEY, FL 34653	CITY-ST-ZIP	New Port Richey, Fla 34654
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 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: 5-8-07