

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2007 8:00 am**  
**Secretary of State**

01-16-2007 90187 002 \*\*\*150.00

**DOCUMENT # P96000042329**

1. Entity Name  
**TAURUS ASSOCIATES, INC.**



Principal Place of Business  
11175 US HWY 1  
JUNO BEACH, FL 33408 US

Mailing Address  
6748 CALLE PONTE BELLA  
RANCHO SANTA FE, CA 92091 US

**40002349**



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

3. Mailing Address  
**57840 TROON WAY**  
Suite, Apt. #, etc.

01092007 Chg-P CR2E034 (12/06)

City & State  
**LA QUINTA, CA**

Zip  
**92253**

Country  
**USA**

4. FEI Number  
**65-6207903**

Applied For  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**O'CONNELL, BRIAN M**  
**515 NORTH FLAGLER DRIVE**  
**18TH FLOOR**  
**W PALM BEACH, FL 33401**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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, 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**  
**After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PS**  
**JOHNSON, LOIS A**  
**6748 CALLE PONTE BELLA**  
**RANCHO SANTA FE, CA 92091**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VP**  
**GUIDER, CYNTHIA**  
**284 NEW HAVEN BLVD**  
**JUPITER, FL 33458**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☒ Change ☐ Addition

**57840 TROON WAY**  
**LA QUINTA, CA 92253**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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☐ Change ☐ 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:**

*Lois A. Johnson*  
**LOIS A. JOHNSON**

**JAN. 9, 07**

**760-771-9199**

Date

Daytime Phone #