


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000081036

1. Entity Name
 THERESA M. SKAHILL, P.A.



Principal Place of Business
 2424 MANATEE AVE WEST
 STE 102
 BRADENTON, FL 34205 US

Mailing Address
 2424 MANATEE AVE WEST
 STE 102
 BRADENTON, FL 34205 US

DO NOT WRITE IN THIS SPACE



01082007 No Chg-P CR2E034 (11/05)

4. FEI Number
 65-0704543

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SKAHILL, THERESA M P.A.
 2424 MANATEE AVE. WEST
 STE 102
 BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE

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. *Same registered agent*

SIGNATURE: *Theresa M. Skahill P.A.* DATE: *Jan. 18, 2007*

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

U00000597213
 01/24/07-80024-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SKAHILL, THERESA M
STREET ADDRESS	2424 MANATEE AVE W SRE 102
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: *Theresa M. Skahill P.A.* Date: *1-18-07* Daytime Phone #: *941 746 5577*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR