2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000092223

1. Entity Name
JUDY WHEELER, P.A.



Principal Place of Business

1631 RIVERVIEW RD

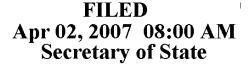
DEERFIELD BEACH, FL 33441

Mailing Address

1631 RIVERVIEW RD

DO NOT WRITE IN THIS SPACE

DEERFIELD BEACH, FL 33441





03042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0719052

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

		Address			

WHEELER, JUDY 1631 RIVERVIEW RD.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

DEEFIELL) BEACH, FL 33441		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
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 a	tapplicable (NOTE: Registered	Agent agnature	e required when reinstaling)	DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2007 fee will be \$550.00	Election Campaign Finance Trust Fund Contribution	cing .	\$5.00 May Be Added to Fees							
10.	OFFICERS AND DIREC	TORS	-								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS WHEELER, JUDY 1631 RIVERVIEW RD. #808 DEERFIELD BEACH, FL 33441				U00000686786 04/10/07-80013-018 150.00						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					04/ 10/01/000015-010 150.00						
TITLE NAME STREET ADDRESS CITY-ST-2IP				DO	NOT WRITE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			!								
TITLE NAME STREET ADDRESS CITY-ST-ZIP											
12. I nereby 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 empoweed 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.											