


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007 8:00 am
Secretary of State

01-10-2007 90052 003 ***150.00

DOCUMENT # P96000093385					
1. Entity Name JERRY RHODES & ASSOCIATES, INC.					
Principal Place of Business 1900 W. GLADES ROAD SUITE 102 BOCA RATON, FL 33431		Mailing Address 1900 W. GLADES ROAD SUITE 102 BOCA RATON, FL 33431			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0708934	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HCRM CORP. 2200 CORPORATE BLVD NW SUITE 401 BOCA RATON, FL 33431			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RHODES, GERALD L		NAME	Rhodes, Gerald L.	
STREET ADDRESS	5533 N MILLITARY TRAIL UNIT 1715		STREET ADDRESS	5590 NE Trieste Way	
CITY-ST-ZIP	BOCA RATON, FL 33496		CITY-ST-ZIP	Boca Raton, FL 33487	
TITLE	PO	<input type="checkbox"/> Delete	TITLE	PO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RHODES, GERALD L		NAME	Rhodes, Gerald L.	
STREET ADDRESS	5533 N. MILLITARY TRAIL UNIT 1715		STREET ADDRESS	5590 NE Trieste Way	
CITY-ST-ZIP	BOCA RATON, FL 33496		CITY-ST-ZIP	Boca Raton, FL 33487	
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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: <i>Gerald Rhodes (Gerald Rhodes)</i>		Date: 1-8-07		Daytime Phone #: 561-314-0919	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

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