

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101337

FILED
Aug 13, 2007
Secretary of State

Entity Name: LAW OFFICES OF EILON KRUGMAN-KADI, P.A.

Current Principal Place of Business:

824 E. UNIVERSITY AVENUE
GAINESVILLE, FL 32601

New Principal Place of Business:

901 N.W. 8TH AVENUE, STE. C3-0
GAINESVILLE, FL 32601

Current Mailing Address:

P.O. BOX 1246
GAINESVILLE, FL 32602

New Mailing Address:

P.O. BOX 2632
GAINESVILLE, FL 32602

FEI Number: 59-3420426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRUGMAN-KADI, EILON
824 E. UNIVERSITY AVENUE
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

JENNINGS, MARY
824 E. UNIVERSITY AVENUE
GAINESVILLE, FL 32601 US

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.

SIGNATURE: MARY JENNINGS

08/13/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KRUGMAN-KADI, EILON
Address: 824 E. UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32601

Title: S () Delete
Name: JENNINGS, MARY
Address: 824 E. UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32601

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCEACHERN, WILLIAM E
Address: 901 NW 8TH AVENUE, STE. C3-0
City-St-Zip: GAINESVILLE, FL 32601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: MELLMAN, RICHARD
Address: 901 N.W. 8TH AVENUE, STE. C3-0
City-St-Zip: GAINESVILLE, FL 32601

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W.E. MCEACHERN

VP

08/13/2007

Electronic Signature of Signing Officer or Director

Date