

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000103227

Entity Name: GARCIA & ORTIZ, P.A.

FILED
Jan 12, 2006
Secretary of State

Current Principal Place of Business:

888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 337032746

Current Mailing Address:

888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 337032746

New Principal Place of Business:

888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 337022402 US

New Mailing Address:

888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 337022402 US

FEI Number: 59-3410694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, LOUIS P
888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
SAINT PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: GARCIA, LUIS
Address: 888 EXECUTIVE CENTER DRIVE WEST STE 101
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: DP () Delete
Name: ORTIZ, LOUIS P
Address: 888 EXECUTIVE CENTER DRIVE WEST STE 101
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: DST () Delete
Name: TONDREAULT, STEPHEN H.
Address: 888 EXECUTIVE CENTER DR W., SUITE 101
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: VD () Delete
Name: DEL RIO, EDDIE
Address: 17402 HIALEAH
City-St-Zip: ODESSA, FL 33556

Title: VD () Delete
Name: WATERS, JAMES P
Address: 2615 WEST GRAND RESERVE CIRCLE #318
City-St-Zip: CLEARWATER, FL 33759

Title: VD () Delete
Name: KREIS, CLAYTON
Address: 616 ADDISON DRIVE N.E.
City-St-Zip: SAINT PETERSBURG, FL 33716

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUIS P. ORTIZ

DP

01/12/2006

Electronic Signature of Signing Officer or Director

Date