2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2007
Secretary of State

DOCUMENT# P96000103227

Entity Name: GARCIA & ORTIZ, P.A.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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 01/15/2007

Electronic Signature of Signing Officer or Director — Date