


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 30, 2007 08:00 A
Secretary of State

DOCUMENT # P97000023566 1. Entity Name LAW OFFICE OF GREGORY M. WAGNER, P.A.		
Principal Place of Business 121 FAIRVIEW AVENUE DAYTONA BEACH, FL 32114	Mailing Address 121 FAIRVIEW AVENUE DAYTONA BEACH, FL 32114	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent JOHNS, BRUCE 944 SOUTH RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		U00000773093 08/30/07-20004-016 150.00 <small>DATE</small>
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVD WAGNER, GREGORY M 121 FAIRVIEW AVENUE DAYTONA BEACH, FL 32114	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WAGNER, JOSEPHINE 121 FAIRVIEW AVENUE DAYTONA BEACH, FL 32114	
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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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		8/27/07 (386)252-3607 <small>Date Daytime Phone #</small>