2008 FOR→PRÐFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT Feb 25, 2008 08:00 AN **Secretary of State** DOCUMENT # P97000023566 1. Entity Name LAW OFFICE OF GREGORY M. WAGNER, P.A. Principal Place of Business · Mailing Address 121 FAIRVIEW AVENUE 121 FAIRVIEW AVENUE DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 02212008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3446360 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNS, BRUCE DO NOT WRITE 944 SOUTH RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114 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, (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PVD TITLE WAGNER, GREGORY M NAME 121 FAIRVIEW AVENUE STREET ADDRESS U000000837046 CITY-ST-ZIP DAYTONA BEACH, FL 32114 STD TITLE WAGNER, JOSEPHINE NAME STREET ADDRESS 121 FAIRVIEW AVENUE CITY-ST-ZIP DAYTONA BEACH, FL 32114 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 of 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

C 3/31/08 (

<u> 8 (384)252-340</u>0

FILED