

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000061272  
 1. Entity Name  
 ANSBACHER & MCKEEL, P.A.



Principal Place of Business      Mailing Address  
 BARRY B ANSBACHER      BARRY B ANSBACHER  
 STE 2450 RIV PL TOWER 1301 RIVERPLC BL      STE 2450 RIV PL TOWER 1301 RIVERPLC BL  
 JACKSONVILLE, FL 32207-9037 US      JACKSONVILLE, FL 32207-9037 US



04282006    No Chg-P    CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
 59-3458497      Not Applicable

5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 ANSBACHER, BARRY B  
 STE 2450 RIVERPLACE TOWER  
 1301 RIVERPLACE BLVD  
 JACKSONVILLE, FL 32207-9037

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>ANSBACHER, BARRY B<br>STE 2450 RIVERPLACE TOWER 1301 RIVERPLC B<br>JACKSONVILLE, FL 32207 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DV<br>MCKEEL, J. THOMAS<br>1301 RIVERPLACE BLVD STE 2450<br>JACKSONVILLE, FL 32207              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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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: Barry B. Ansbacher      Date: 4/28/06      Daytime Phone #: (904) 396-8058