


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2006 8:00 am
Secretary of State

01-10-2006 90023 026 ***150.00

DOCUMENT # P97000101179 1. Entity Name KIMSEY & ASSOCIATES, P.A.	
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Principal Place of Business 3816 W. LINEBAUGH AVENUE SUITE 412 TAMPA, FL 33618	Mailing Address 3816 W. LINEBAUGH AVENUE SUITE 412 TAMPA, FL 33618
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0000040J



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01062006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3479939	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KIMSEY, PAUL S
3816 W. LINEBAUGH AVENUE
SUITE 412
TAMPA, FL 33624

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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: *Paul S Kimsey* (NOTE: Registered Agent signature required when reinstating) DATE: 1/6/06

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 NAME STREET ADDRESS CITY-ST-ZIP	PSTD KIMSEY, PAUL 3816 W LINEBAUGH AVE STE 412 TAMPA, FL 33618
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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: *Paul S Kimsey* DATE: 1/6/06 (813) 265-9292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #