

ANNUAL REPORT (AR)

DOCUMENT # P97000101738

1. Entity Name
EDWARD A. DOXEY, C.P.A., P.A.



FILED
Apr 09, 2007 08:00 AM
Secretary of State

Principal Place of Business 1901 W. TERRA MAR DRIVE POMPANO BEACH FL 33062	Mailing Address 1901 W. TERRA MAR DRIVE POMPANO BEACH FL 33062
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2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt #, etc. Suite, Apt #, etc.

City & State City & State

Zip Country Zip Country

1st MOORE CR2E034 (10/06)

4. FEI Number **61-2717541** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOXEY, EDWARD A
1901 W. TERRA MAR DRIVE
POMPANO BEACH FL 33062

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	Delete	TITLE	NAME	Change	Addition
	PSTD DOXEY, EDWARD A 1901 W. TERRA MAR DRIVE POMPANO BEACH FL 33062	<input type="checkbox"/>				
		<input type="checkbox"/>				
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04/17/07-80094-001 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

(a.u) 942-6185