2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000089392

Entity Name: HILL, ADAMS, HALL & SCHIEFFELIN, P.A.

FILED Mar 20, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1030 WEST CANTON AVENUE SUITE 201 WINTER PARK, FL 32789					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX 1090 WINTER PARK, FL 32792					
FEI Number:	59-3544884	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
HALL, LARRY D 1030 WEST CANTON AVENUE SUITE 201 WINTER PARK, FL 32789 US 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.					
SIGNATURE: Electronic Signature of Registered Agent Date					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	DCTC () HILL, G. BRUCE 5225 TIMBERVII ORLANDO, FL 3	EW TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () BARTOLOMEI, N 2501 MACBETH MAITLAND, FL	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	1VD () ADAMS, JANET P.O. BOX 191 WINDERMERE,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PCD () HALL, LARRY D 728 CRICKLEW HEATHROW, FL	OOD TERR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	2VD () SCHIEFFELIN, T 424 TIMBER RID LONGWOOD, FI	DGE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	3V () LIVINGSTON, HE 360 TWELVE OF WINTER SPRING	AKS DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE HILL DCTC 03/20/2006