2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094936

FILED Feb 10, 2007 Secretary of State

Entity Name: FALCON DESIGN CONSULTANTS, II	NC.
Current Principal Place of Business:	New Principal Place of Business:
2377 LINWOOD AVENUE #210 NAPLES, FL 34112	
Current Mailing Address:	New Mailing Address: New Mailing Address: Per Applied For () FEI Number Not Applicable () Certificate of Status Desired () In gistered Agent: Name and Address of New Registered Agent: Se statement for the purpose of changing its registered office or registered agent, or both, The of Registered Agent Date I Contribution (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
2377 LINWOOD AVENUE #210 NAPLES, FL 34112	
FEI Number: 65-0875587 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	
FALCONER, JONES III 1255 COBIA COURT NAPLES, FL 34102 US	
The above named entity submits this statement for the in the State of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered A	gent Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: PSTD () Delete	Title: PSTD (X) Change () Addition

JONES, FALCONER III JONES, FALCONER III Name: Name: 1255 COBIA COURT 1255 COBIA COURT Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 US () Change (X) Addition

Title: () Delete Title: SEC JONES, BRIGITTE Name: Name: Address: Address: 1255 COBIA COURT City-St-Zip: NAPLES, FL 34102 US City-St-Zip:

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: FALCONER JONES III **PSTD** 02/10/2007