## 2007 FOR PROFIT CORPORATION .... **ANNUAL REPORT**

## **DOCUMENT # P99000058734**

1. Entity Name SANDRA A. MCCAUL, P.A.



FILED Feb 26, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

1333 TAMARIND WAY BOCA RATON, FL 33486 1333 TAMARIND WAY BOCA RATON, FL 33486



01042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0931154

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional -Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

MCCAUL, BENJAMIN V

## DO NOT WRITE

BOCA RATON, FL 33486			IN THIS SPACE			
	tions of registered agent.			egistered agent, or be	oth, in the State of Florida. I am familiar with, and accept	
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution			cing	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT D MCCAUL, BENJAMIN V 1333 TAMARIND WAY BOCA RATON, FL 33486	CTORS			U00000647891	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D MCCAUL, SANDRA A 1333 TAMARIND WAY BOCA RATON, FL 33486			03/06/07-80090-016 158.75		
NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE			
NAME STREET ADDRESS CITY-ST-ZIP		:		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE						

12. I hereby certify that the information supplied with this filling 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

STREET ADDRESS CITY-ST-ZIP

Cleryan V. McCaul

02/23/2007