2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

EXCHATURE AND TYPED OR PRINTED NAME OF SIDNING OFFICER OR DIRECTOR

FILED Feb 20, 2006 08:00 AM Secretary of State

1. Entity Name	MENT # P9900010882 MEYER, P.A.	6		
Principal Place of Business Mailing Address 2401 US HWY 27 S 2401 US HWY 27 S SEBRING, FL 33870 SEBRING, FL 33870				
DO NOT WRITE IN THIS SPACE 8. Name and Address of Current Registered Agent				01232006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For Nox Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
MEYER, KEVIN M 5048 STRAFFORD OAKS DRIVE SEBRING, FL 33872				DO NOT WRITE IN THIS SPACE
The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and their applicable (NOTE: Registered Agent signature required when reinstaing) DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Vection Campaign Financing Trust Fund Contribution.			scing \$5.	5.00 May Be ded to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEYER, KEVIN M 5048 STRAFFORD OAKS DRIVE SEBRING, FL 33872			000000439068 03/01/06-80031-023 150.00
ITTLE NAME STREET AGDRESS CITY-ST-ZIP				COLOTE GO COCCT ACA VALLE
TITLE MAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CHTY-ST-ZIP				
12. I hereby of indicated of the concentration changed,	certify that the information supplied with this to on this report or supplemental report is true a poration or the receiver or pristed empowers or on an attachment with an address, who	iling does not qualify for the extended accurate and that my signal that my signal the except of the report as required to the pixel of the powered.	amptions contained ture shall have the red by Chapter 607	ed in Chapter 119, Florida Statutes, I further certify that the information a same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 10 or Block 11 if