## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S36058

Entity Name: 701 U.S. ONE, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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701 U.S. HIGHWAY ONE SUITE 402

NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

701 U.S. HIGHWAY ONE SUITE 402

NORTH PALM BEACH, FL 33408

FEI Number: 65-0247111 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:

RYAN, JAMES H. 701 U.S. ONE SUITE 402 NORTH PALM BEACH, FL 33408 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:

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Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GARY, ELIZABETH D.,
Address: 701 U.S. HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL

Title: D ( ) Delete
Name: SCHIRALLI, ANGELO P.,
Address: 701 U.S. HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL

Title: D ( ) Delete
Name: RYAN, JAMES H.,
Address: 701 U.S. HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL

 Title:
 D
 ( ) Delete

 Name:
 GARY, JOHN W III

 Address:
 701 U.S. HIGHWAY ONE

 City-St-Zip:
 NORTH PALM BEACH, FL

Title: VD (X) Change ( ) Addition

Name: GARY, ELIZABETH D., Address: 701 U.S. HIGHWAY ONE City-St-Zip: NORTH PALM BEACH, FL

Title: PDST (X) Change ( ) Addition

Name: SCHIRALLI, ANGELO P., Address: 701 U.S. HIGHWAY ONE City-St-Zip: NORTH PALM BEACH, FL

Title: VD (X) Change ( ) Addition

Name: GINN, SHANNON R
Address: 701 U.S. HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL

Title: VD (X) Change ( ) Addition

Name: GARY, JOHN W III
Address: 701 U.S. HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL

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: ANGELO SCHIRALLI P 04/23/2007