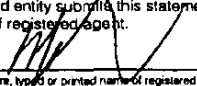
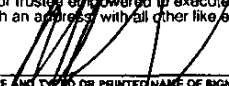


FILED
Jun 04, 2007 8:00 am
Secretary of State

05-09-2007 90107 045 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # S47953		
1. Entity Name AMADEAS LEGAL PUBLISHING, INC.		
Principal Place of Business P.O. BOX 6261 TITUSVILLE, FL 32782-6261 US	Mailing Address P.O. BOX 6261 TITUSVILLE, FL 32782-6261 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ERLENBACH, SUSAN KW 2532 GARDEN ST TITUSVILLE, FL 32796		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE <u>5/17/07</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ERLENBACH, KURT 3640 ROSEHAVEN PL TITUSVILLE, FL	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST ERLENBACH, SUSAN 3640 ROSEHAVEN PL TITUSVILLE, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ERLENBACH, SUSAN 3640 ROSEHAVE PL TITUSVILLE, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address with all other like empowered. SIGNATURE:  <u>Kurt Erlenbach</u> Date <u>5/17/07</u> Daytime Phone # <u>321 264 6000</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		