

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90201 014 ***150.00

50001513

DOCUMENT # S99807 1. Entity Name DOUGLAS S. GREGORY, P.A.																											
Principal Place of Business 2309 S MACDILL AVE SUITE 101 TAMPA, FL 33629 US		Mailing Address 2309 S MACDILL AVE SUITE 101 TAMPA, FL 33629 US																									
2. Principal Place of Business - No P.O. Box # 607 West Bay St. Suite, Apt. #, etc.		3. Mailing Address 607 West Bay St. Suite, Apt. #, etc.																									
City & State Tampa, FL Zip 33606 Country		City & State Tampa, FL Zip 33606 Country																									
4. FEI Number 59-3097791		Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent GREGORY, DOUGLAS S. 2309 S MACDILL AVE SUITE 101 TAMPA, FL 33629		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 607 West Bay St City Tampa FL Zip Code 33606																									
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: <i>Douglas S. Gregory</i> DATE: 4/2/07 Signature, title or printed name of registered agent should be 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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">PDST</td> <td style="width: 10%;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>GREGORY, DOUGLAS S.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2309 S MACDILL AVE., SUITE 101</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>TAMPA, FL 33629</td> <td></td> </tr> </table>		TITLE	PDST	☐ Delete	NAME	GREGORY, DOUGLAS S.		STREET ADDRESS	2309 S MACDILL AVE., SUITE 101		CITY- ST- ZIP	TAMPA, FL 33629		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">607 West Bay St</td> <td style="width: 10%;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>Tampa, FL 33606</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	607 West Bay St	☐ Change ☐ Addition	NAME	Tampa, FL 33606		STREET ADDRESS			CITY- ST- ZIP		
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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: <i>Douglas S. Gregory, President</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: 4/2/07 DATE																									
813-253-0404 OWNER PHONE #																											