

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 13, 2006 08:00 AM
Secretary of State**

DOCUMENT # V36483

1. Entity Name
**TERRENCE WM. ACKERT, PROFESSIONAL
ASSOCIATION**



Principal Place of Business
**112 W CITRUS ST
ALTAMONTE SPRINGS, FL 32714 US**

Mailing Address
**P O BOX 2548
WINTER PARK, FL 32790 US**



01102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3121556

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ACKERT, TERRENCE WM.
112 W. CITRUS STREET
ALTAMONTE SPRINGS, FL 32714**

**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, and is familiar with, and accept the obligations of registered agent.

01/18/06-80061-020 150.00

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution ☐ **Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	D ACKERT, T.W. 112 W CITRUS ST ALTAMONTE SPRINGS, FL 32714
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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

T.W. Ackert, Director

1/11/06

Date

407-645-0781

Daytime Phone #