2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2006
Secretary of State

DOCUMENT# V57515

Entity Name: DAVID W. OLSON, P.A.

Current Principal Place of Business:

222 LAKEVIEW AVE
STE 560
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

515 NORTH FLAGLER DRIVE
STE P-300
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

222 LAKEVIEW AVE
STE 560
WEST PALM BEACH, FL 33401 US

New Mailing Address:

515 NORTH FLAGLER DRIVE
STE P-300
WEST PALM BEACH, FL 33401 US

FEI Number: 65-0347232 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLSON, DAVID W.
222 LAKEVIEW AVE
STE 225
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

OLSON, DAVID W.
515 NORTH FLAGLER DRIVE
STE P-300
WEST PALM BEACH, FL 33401 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: 07/13/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: OLSON, DAVID W
Address: 222 LAKEVIEW AVE., STE 560
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: OLSON, DAVID W
Address: 515 NORTH FLAGLER DRIVE, STE P-300
City-St-Zip: WEST PALM BEACH, FL 33401

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: DAVID W. OLSON PD 07/13/2006
Electronic Signature of Signing Officer or Director — Date