


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 452368
 1. Entity Name
FLORIDA CENTRAL CONTROL, INC.



Principal Place of Business
**5803 GREENVILLE AVE.
 DALLAS, TX 75206**

Mailing Address
**5803 GREENVILLE AVE.
 DALLAS, TX 75206**

DO NOT WRITE IN THIS SPACE



01102007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1537830

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**GREEN, W.T.
 9030 W. FORT ISLAND TRAIL, BLDG. 5
 CRYSTAL RIVER, FL 32629**

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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 _____
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

100000598140
 01/24/07-80064-008 150.00

10. OFFICERS AND DIRECTORS

TITLE	VSD
NAME	MOSER, PAUL
STREET ADDRESS	5803 GREENVILLE AVE
CITY-ST-ZIP	DALLAS, TX
TITLE	T
NAME	STOESSNER, K F, JR
STREET ADDRESS	5803 GREENVILLE AVE
CITY-ST-ZIP	DALLAS, TX
TITLE	D
NAME	HUGHES, VESTER T JR
STREET ADDRESS	5803 GREENVILLE AVE
CITY-ST-ZIP	DALLAS, TX
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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 titles empowered.

SIGNATURE: *R K STOESSNER*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *1/11/07*

Daytime Phone # _____