


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 14, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 754480 1. Entity Name FLORIDA FOREST FESTIVAL, INC.	
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Principal Place of Business 428 NORTH JEFFERSON STREET PERRY, FL 32347 US	Mailing Address P.O. BOX 1062 PERRY, FL 32348 US
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**DO NOT WRITE IN THIS SPACE**



02122008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-0772717	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  PARKER, GREG 411 N. WASHINGTON ST. PERRY, FL 32347
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**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reselecting) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITFIELD, RAY 428 NORTH JEFFERSON PERRY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OLCOTT, RICK 428 NORTH JEFFERSON PERRY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMMONS, DAN 428 NORTH JEFFERSON PERRY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TAYLOR, DAWN 428 NORTH JEFFERSON PERRY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VIOLA, MARTE 428 NORTH JEFFERSON STREET PERRY, FL 32347
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000828188  
 02/25/08-80002-009 61.25

**DO NOT WRITE 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 617, 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: Richard S. L. Olcott      2/12/08      850.584.8733  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #