


2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 768919 1. Entity Name 4139 MANAGEMENT, INC.	
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FILED

07 APR 17 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 4139 S ATLANTIC AVE NEW SMYRNA BEACH, FL 32169 US	Mailing Address 4139 S ATLANTIC AVE NEW SMYRNA BEACH, FL 32169 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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04022007 Chg-NP CR2E037 (12/06)

City & State Zip Country	City & State Zip Country
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4. FEI Number 59-2334672	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BROOKE, NELSON A 255 MINORCA BEACH WAY STE 405 NEW SMYRNA BEACH, FL 32169
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> Delete MYRICK, BRUCE P.O. BOX 616278 ORLANDO, FL 32861
TITLE	VP <input type="checkbox"/> Delete ABBOTT, RAY 4139 S ATLANTIC B 601 NEW SMYRNA BEACH, FL 32169
TITLE	T <input type="checkbox"/> Delete BROOKE, NESLON 255 MINORCA BEACH WAY 405 NEW SMYRNA BEACH, FL 32169
TITLE	S <input type="checkbox"/> Delete ZEBROWSKI, ROBERT 4139 S ATLANTIC A 101 NEW SMYRNA BEACH, FL 32169
TITLE	D <input type="checkbox"/> Delete DECKER, BILLY 30514 DEBARY, FL 32713
TITLE	D <input type="checkbox"/> Delete MARKLAND, BRENDA 271 WEST CITRUS ST ALTAMONTE SPRINGS, FL 32714

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Joe Hutchins 16100 SW 89th Ave Miami, FL 33157
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600099195436 04/27/07--01030--026 **61.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Bruce Myrick 4/2/07 4075210104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

204/20