2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003618

Title:

Name:

Address:

City-St-Zip:

FILED Aug 08, 2008 Secretary of State

Entity Nar	ne: FORMTE	CH ENTERPRISES, INC.					
Current P	rincipal Place	of Business:	New Pri	New Principal Place of Business:			
1415 PAN ⁻ NAPLES, F	THER LANE S FL 34109	UITE 151					
Current Mailing Address:			New Mailing Address:				
1415 PAN ⁻ NAPLES, F	THER LANE S FL 34109	UITE 151					
FEI Number:	34-1392863	FEI Number Applied For ()	FEI Number Not Ap	oplicable ()	Certificate of Status Desire	ed ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
3301 BON	I, MANNA & DI ITA BEACH RO PRINGS, FL 3	DAD SUÍTE 100					
	named entity s e of Florida.	submits this statement for the po	urpose of changing	g its registered	d office or registered agent,	or both,	
SIGNATUR	RE:						
	Electron	ic Signature of Registered Age	nt		Date		
Election Car	npaign Financing	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	CPT () TURK, DAVID L 1052 SPYGLAS NAPLES, FL 34	SS LANE	Title: Name: Address: City-St-Zip	C TURK, DAVII 1052 SPYGI : NAPLES, FL	ASS LANE		
Title: Name: Address: City-St-Zip:	DVP () TURK, DAVID L 1052 SPYGLAS NAPLES, FL 34	SS LANE	Title: Name: Address: City-St-Zip		(X) Change ()Addition PAUL T IIN STATION ROAD ITER, OH 44401		
Title: Name: Address: City-St-Zip:	DS () CALCATERRA, 1133 WINDWA KENT, OH 442	RD LANE	Title: Name: Address: City-St-Zip	DST URBAN, WA 142 LOGAN BEDFORD, (STREET		

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: WAYNE M. URBAN DST 08/08/2008

() Delete

() Change (X) Addition

TURK, CYNTHIA L

NAPLES, FL 34162

1052 SPYGLASS LANE