2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2008 08:00 AN Secretary of State

| DOCUI 1. Entity Nam O. HUSSE | | | | | <i>y</i> |
|---|---|--|--|---|---|
| Principal Place 5571-A HUN NAPLES, FL | | Mailing Address % ORVILLE H HUSSEY 4801 20TH PLACE, SW NAPLES, FL 34116-5915 | | T 1 102HEB KII BIRKI GETAK BIIK KEBBI AN | Ar blah graf birn afan arak arak alkabal (1788) |
| D | O NOT WRITE | | CE | 03262008 No Chg-P 4. FEI Number 59-2106067 | CR2E034 (11/05) Applied For Not Applicable |
| i segar dan dan segar segar Segar segar se | | | | 5. Certificate of Status Desired | S8.75 Additional Fee Required |
| 76. ** 176.0* 1778. * 3 | 6. Name and Address of Current | Registored Agont | | | Tee Required |
| 4801 20TH GOLDEN (| ORVILLE H I PLACE, SW GATE, FL 33999 named entity submits this statement follows of registered agent. | r the purpose o ^f changing its registe | DO NOT WRITE IN THIS SPACE ered office or registered agent, or both, in the State of Florida. I am familiar with, and accept | | |
| SIGNATURE_ | Signature, typed or printed name of registered agent | and title if applicable (NOTE. Register | red Agent signature required | d when reinstating) | DATE |
| FILI After Ma | E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0 | 9. Election Campaign Fina Trust Fund Contribution | | .00 May Be led to Fees | |
| 10. | OFFICERS AND | DIRECTORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP HUSSEY, ORVILLE H 4801 20TH PLACE SW GOLDEN GATE, FL 0, | | U00000877880 04/14/08-80032-012 150.00 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS (CITY-ST-ZIP | | | DO NOT WRITE | | |
| TITLE NAME STREET ADDRESS CITY-S1-ZIP | | | | IN THIS SI | PACE |
| TITLE NAME STREET ADDRESS = CITY-ST-ZIP | | | The second of th | | |
| TITLE | | | | | |
| 12. I hereby of indicated of the correlatinged. | certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empror or on an attachment with an address. | this filing does not qualify for the estrue and accurate and that my sign owered to execute this report as required that the second that the s | ature shall have the pired by Chapter 60 | d in Chapter 119, Florida Statutes, same legal effect as if made under 7, Florida Statutes; and that my nan | I further certify that the information oath; that I am an officer or director ne appears in Block 10 or Block 11 if |

ORVILLE H. WUSSEY