

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90043 021 ***150.00

DOCUMENT # F46504

1. Entity Name

FORNELL ENTERPRISES, INC.



Principal Place of Business

**642 CARSWELL AVENUE
P.O. BOX 1212
HOLLY HILL FL 32125**

Mailing Address

**642 CARSWELL AVENUE
P.O. BOX 1212
HOLLY HILL FL 32125**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/07)

Zip

Country

Zip

Country

4. FEI Number

59-2141957

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TUMBLESON DOYLE J.
150 SOUTH PALMETTO AVENUE, BOX A
DAYTONA BEACH FL 32114**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

FILE NOW!!! - FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **DPS**
STREET ADDRESS **FORNELL, RICHARD H**
CITY-ST-ZIP **642 CARSWELL AVENUE
HOLLY HILL FL**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **DALIESSIO, LEIGH ASHLEY**
CITY-ST-ZIP **642 CARSWELL AVENUE
HOLLY HILL FL 32117**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **FORNELL, KATHRYN L**
CITY-ST-ZIP **642 CARSWELL AVENUE
HOLLY HILL FL 32117**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **PONTIUS, LILA**
CITY-ST-ZIP **642 CARSWELL AVE
DAYTONA BEACH FL 32117**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **Ford, Kathryn & Lindsey Fornell**
STREET ADDRESS **642 Carswell Ave**
CITY-ST-ZIP **Holly Hill, FL 32117**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.

SIGNATURE:

R.H. Fornell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R.H. FORNELL Pres. 4/7/08
Date

386
253.9500
Daytime Phone #