

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2008 08:00 AM
Secretary of State

DOCUMENT # J88336

1. Entity Name
COOKS POWER EQUIPMENT DISTRIBUTORS, INC.



Principal Place of Business Mailing Address
 395 ENTERPRISE STREET 395 ENTERPRISE STREET
 OCOEE FL 34761 OCOEE FL 34761



1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-2852767** 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

COOK, KENNETH W
395 W. ENTERPRISE STREET
OCOEE FL 34761

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 _____ DATE _____
Signature of principal officer or director, registered agent and his employee. (NOTE: Registered agent signature expires when commissioning.)

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 **\$5.00** May Be
 Trust Fund Contribution (Added to Fees)

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TYPE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PD	COOK, KENNETH W.	395 W. ENTERPRISE STREET	OCOEE FL 34761				
TD	COOK, MARY F.	395 W. ENTERPRISE STREET	OCOEE FL 34761				
S	COOK, LYDIA G.	395 W. ENTERPRISE STREET	OCOEE FL 34761				

100000891030
 04/23/08-80007-024 150.00

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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary F. Cook* **MARY F. COOK** 4/8/08 407-877-8900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR