2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 25, 2008 8:00 am Secretary of State

FRISCIA, FRANCIS E MEIROSE & FRISCIA, P.A. 500 NORTH WESTSHORE BLVD STE 635 TAMPA, FL 33609 S. Certificate of Status Sested	
131 GUNN HIGHWAY TAMPA, FL 33624 US 13. Mailing Address Sute, Apt. #, etc. Sute, Apt. #, etc. Sute, Apt. #, etc. City & State Country Screen Address of New Registered Agent Name Name FRISCIA, FRANCIS E MEIROSE & FRISCIA, P.A. SON ONORTH WESTSHORE BLVD STE 635 TAMPA, FL 33609 City City FL Z Street Address (P.O. Box Number is Not Acceptable) City FL Z Signars, typief or prised name of registered agent. Note: Filling Fee is \$61.25 Due by May 1, 2008 P. Election Campaign Financing Trust Fund Contribution. Added to Fees Make check pay Florida Department 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECT ITIE MOSKOS, JACK SIRET ADDRESS SA45 PINEBARK LN. SIRET ADDRESS SA45 PINEBARK LN.	
Suite, Apt. #, etc. Suite, Apt. #, etc.	
City & State City & State City & State City & State 4. FEI Number 59-2493573 2ip Country 5. Certificate of Status Desired	
Signature Signature Signature of registered agent Signature of printed name of registered agent Signature Signatur)
8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRISCIA, FRANCIS E MEIROSE & FRISCIA, P.A. 500 NORTH WESTSHORE BLVD STE 635 TAMPA, FL 33609 City FL 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 familiate obligations of registered agent. SIGNATURE Filling Fee is \$61.25 Due by May 1, 2008 P. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ITILE PD MOSKOS, JACK SIRET ADDRESS STREET ADDRESS	Applied For Not Applicable
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STREET ADDRESS 30218 FAIRWAY DR. STREET ADDRESS CITY-ST-ZIP WESLEY CHAPEL, FL 33543 CITY-ST-ZIP	e 🗍 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 it 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: _

SUSUN XENNE DENNETT ESq ESGNATURE AND TYPED OR PRINTED NAME OF BURGHING OFFICER OR ORIECTOR

2/12/08

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