2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070429

Entity Name: G & E ENTERPRISES OF OKEECHOBEE, INC.

FILED Mar 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 304 S.E. 8TH AVENUE 6745 NE 304TH STREET OKEECHOBEE, FL 34974 OKEECHOBEE, FL 34972 **Current Mailing Address: New Mailing Address:** 304 S.E. 8TH AVENUE 6745 NE 304TH STREET OKEECHOBEE, FL 34974 OKEECHOBEE, FL 34972 FEI Number: 56-2461365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: RUCKS, GLENNA 6745 NE 304TH STREET RUCKS, GLENNA 304 S.E. 8TH AVENUE OKEECHOBEE, FL 34974 US OKEECHOBEE, FL 34972 US 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. SIGNATURE: 03/22/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition RUCKS, GLENNA Name: Name: RUCKS, GLENNA 304 S.E. 8TH AVENUE 6745 NE 304TH STREET Address: Address: City-St-Zip: OKEECHOBEE, FL 34974 City-St-Zip: OKEECHOBEE, FL 34972 SVD Title: Title: () Delete () Change () Addition RUCKS, EDWIN JR. Name: Name: 28320 N. E. 55TH AVENUE Address: Address: OKEECHOBEE, FL 34972 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition CHASTAIN, GLEN Name: Name: 28670 N. E. 55TH AVENUE Address: Address: City-St-Zip: OKEECHOBEE, FL 34972 City-St-Zip: Title: () Delete Title: () Change () Addition BRASWELL, SABRINA Name: Name: Address: 28650 N. E. 55TH AVENUE Address: City-St-Zip: OKEECHOBEE, FL 34972 City-St-Zip: Title: Title: () Delete () Change () Addition ROEHM, BONNIE Name: Name: 2168 N. W. 3RD STREET Address: Address: City-St-Zip: OKEECHOBEE, FL 34972 City-St-Zip:

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

SIGNATURE: GLENNA RUCKS PRE 03/22/2007