

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093758

FILED
Jan 11, 2007
Secretary of State

Entity Name: OLD SEVILLE EXPENSE REDUCTION, INC.

Current Principal Place of Business:

4504 TWIN OAKS DR
PENSACOLA, FL 32506 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 967
GULF BREEZE, FL 325620967 US

New Mailing Address:

FEI Number: 20-3237783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYLES, BRENT L
9501 SCENIC HWY
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOYLES, BRENT
Address: 9501 SCENIC HWY
City-St-Zip: PENSACOLA, FL 32514 US

Title: VP () Delete
Name: BOYLES, TODD
Address: 3043 SKAGGS ST
City-St-Zip: GULF BREEZE, FL 32563

Title: VP (X) Delete
Name: JOHNSON, JAMES A
Address: 4738 PEBBLE CREEK DR
City-St-Zip: PENSACOLA, FL 325264416 US

Title: VP () Delete
Name: STEPHENS, CARY Y
Address: 5722 HIGHLAND LAKE DR
City-St-Zip: MILTON, FL 32583 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CHRISTY HALL-CHRISTIAN

ACC

01/11/2007

Electronic Signature of Signing Officer or Director

_____ Date