

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048103

FILED
Feb 05, 2008
Secretary of State

Entity Name: MORADA ENTERPRISES, INC.

Current Principal Place of Business:

400 EAST NELSON
DEFUNIAK SPRINGS, FL 32435

New Principal Place of Business:

Current Mailing Address:

P O BOX 190
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

400 EAST NELSON
DEFUNIAK SPRINGS, FL 32435

FEI Number: 20-4627656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COFFIELD SACHS, COLLEEN
1719 S. COUNTY HIGHWAY 393
SANTA ROSA BEACH, FL 32459 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, D () Delete
Name: HARDING, BRADLEY A
Address: 1059 BRIDGE CREEK DR.
City-St-Zip: PONCE DE LEON, FL 32455

Title: VP D () Delete
Name: HARDING, ANNE M
Address: 1059 BRIDGE CREEK DRIVE
City-St-Zip: PONCE DE LEON, FL 32455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BRADLEY A. HARDING

PRES

02/05/2008

Electronic Signature of Signing Officer or Director

Date