

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000106398

1. Entity Name
F.C. PLATT, INC.



Principal Place of Business
 2200 SIMON ROAD
 MELBOURNE, FL 32904

Mailing Address
 2200 SIMON ROAD
 MELBOURNE, FL 32904



04062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3484200 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

PLATT, JANET P
 2220 SIMON RD
 MELBOURNE, FL 32904

DO NOT WRITE IN THIS SPACE

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000900151
 04/29/08-80018-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	F CARLYLE PLATT
STREET ADDRESS	2200 SIMON RD
CITY-ST-ZIP	MELBOURNE, FL 32904
TITLE	TSD
NAME	PLATT, JANET P
STREET ADDRESS	2200 SIMON RD
CITY-ST-ZIP	MELBOURNE, FL 32904
TITLE	D
NAME	SANDRA P LOVETT
STREET ADDRESS	2500 SIMON RD
CITY-ST-ZIP	MELBOURNE, FL 32904
TITLE	D
NAME	JUDITH P ARNOLD
STREET ADDRESS	12700 E IRLO BRONSON HWY
CITY-ST-ZIP	ST CLOUD, FL 34773
TITLE	D
NAME	CARYL P UNGERER
STREET ADDRESS	6250 NE 20TH TERRACE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	D
NAME	PLATT, DOUGLAS
STREET ADDRESS	3300 SAND GULLEY DR
CITY-ST-ZIP	MELBOURNE, FL 32904

DO NOT WRITE IN THIS SPACE

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

SIGNATURE:

Janet P. Platt **JANET P. PLATT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-08
 Date

321-723-0884
 Daytime Phone #