


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # P99000088424

1. Entry Name
FINAL TOUCH DEVELOPMENT CORP.



Principal Place of Business Mailing Address

27910 LINCOLN PLACE **27910 LINCOLN PLACE**
WESLEY CHAPLEY, FL 33544 **WESLEY CHAPLEY, FL 33544**

DO NOT WRITE IN THIS SPACE



04062007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3604595	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CHENOWETH, RAYMOND
27910 LINCOLN PLACE
WESLEY CHAPLEY, FL 33544

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000723155 05/02/07-80059-021 150.00
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10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CHENOWETH, RAYMOND
STREET ADDRESS	27910 LINCOLN PLACE
CITY-ST-ZIP	WESLEY CHAPLEY, FL 33544
TITLE	V
NAME	FOMUKE, RICHARD
STREET ADDRESS	3413 PENDLETON WAY
CITY-ST-ZIP	LAND O' LAKES, FL 34639
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:  **4-17-07** **813-267-6897**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #