
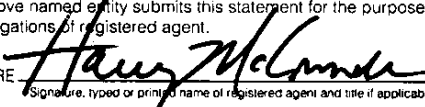
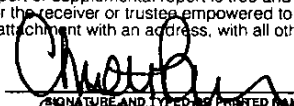


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 07, 2007 8:00 am
Secretary of State

09-07-2007 90003 003 ***158.75

DOCUMENT # 260110 1. Entity Name MILDRED FLIEHR, INC.					
Principal Place of Business 2920 RIVER POINT DRIVE DAYTONA BEACH, FL 32118-5915 US			Mailing Address 2920 RIVER POINT DRIVE DAYTONA BEACH, FL 32118-5915 US		
2. Principal Place of Business - No P.O. Box # 200 Colonial Ctr Parkway.		3. Mailing Address 200 Colonial Ctr Parkway.			
Suite, Apt. #, etc. Suite 170		Suite, Apt. #, etc. Suite 170			
City & State Lake Mary, FL		City & State Lake Mary, FL			
Zip 32746	Country USA	Zip 32746	Country USA	4. FEI Number 59-0997785	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SIGEL, HOWARD 2920 RIVER POINT DRIVE DAYTONA BEACH, FL 32118			7. Name and Address of New Registered Agent Name Harry G. McConnell Street Address (P.O. Box Number is Not Acceptable) 444 Seabreeze Boulevard Suite 900 City Daytona Beach, FL Zip Code 32118		
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  Harry G. McConnell, attorney-at-law August 30, 2007 <small>Signature, typed or printed name of registered agent and title if applicable. Counsel for the Corporation (Not for Filing)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST SIGEL, HOWARD 2920 RIVER POINT DRIVE DAYTONA BEACH, FL <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST Parker, Christene R. 200 Colonial Center Parkway Lake Mary, FL 32746 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:  Christene R. Parker, PST Sept 4, 2007 407-333-2166 <small>Signature and typed or printed name of signing officer or director. Date</small>					