

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # 261126 1. Entity Name FER-MAR ENTERPRISES, INC.	
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Principal Place of Business 3801 SE FEDERAL HIGHWAY STUART, FL 34997	Mailing Address 3801 SE FEDERAL HIGHWAY STUART, FL 34997 US
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02122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1100786	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WALLACE, KATHLEEN 1472 S. OCEAN BLVD PALM BCH, FL 33480

**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 renewing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WALLACE KATHLEEN 1472 S. OCEAN BLVD PALM BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, WILLIAM F. PO BOX 190050 ATLANTA, GA 31119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, JAY 3101 NORTHWOODS DRIVE GREENSBORO, GA 30642
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, TIMOTHY F USIS EMBASSY, UNIT 45004 APO, AP 05
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000670588
03/27/07-80117-023 150.00

**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 110, 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: Kathleen J. Wallace March 9, 2007 772-283-6001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #