


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2008 8:00 am
Secretary of State

01-16-2008 90049 032 ***150.00

DOCUMENT # 269482 1. Entity Name 40 ACRE CORPORATION					
Principal Place of Business 2290 LAKELAND HILLS BLVD. LAKELAND, FL 33803-2919 US			Mailing Address 2290 LAKELAND HILLS BLVD. LAKELAND, FL 33805 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1009374	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent PUTNAM, ABEL A 500 S. FLORIDA AVE. SUITE 300 LAKELAND, FL 33801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS YANCEY, JAMES A <input type="checkbox"/> Delete 1571 ROYAL FOREST LOOP LAKELAND, FL 33813		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YANCEY, TERESA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1571 ROYAL FOREST LOOP LAKELAND, FL 33813	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DAVIS, JUNE <input type="checkbox"/> Delete 535 SUSAN DRIVE LAKELAND, FL 33803		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, JANE A <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 535 SUSAN DRIVE LAKELAND, FL 33803	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LAWHON, JIMMY <input type="checkbox"/> Delete 2290 LAKELAND HILLS BLVD. LAKELAND, FL 33805		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YANCEY, JOHN RICHARD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 8822 SW 38th AVENUE GAINESVILLE, FL 32068	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DAVIS, MICHAEL H <input type="checkbox"/> Delete 1025 ORANGE CAMP ROAD DELAND, FL 327247914		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUGHEY, RON J <input type="checkbox"/> Delete 129 VICTOR ROAD LAKELAND, FL 33809		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HUGHEY, BARBARA L <input type="checkbox"/> Delete 129 VICTOR ROAD LAKELAND, FL 33809		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: <i>Barbara L. Hughey</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR BARBARA L. HUGHEY, TREASURER			Date 1/14/08		Daytime Phone # (863) 682-4111