2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 29, 2008 8:00 am Secretary of State **DOCUMENT # 292998** 02-29-2008 90012 049 ***150.00 **B. RUSH APPLE COMPANY** Mailing Address Principal Place of Business 8102 NORTH ARMENIA AVENUE 8102 NORTH ARMENIA AVE TAMPA, FL 33604 TAMPA, FL 3604 02252008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1105626 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent APPLE, ERWIN S DO NOT WRITE 8102 NORTH ARMENIA AVE **TAMPA, FL 33604** 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 Signature, typed or printed name of registered agent any (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE APPLE, ERWIN S NAME STREET ADDRESS 13925 LAKE MAGDALENE BV CITY-ST-ZIP **TAMPA, FL 33618** VP TITLE APPLE, JOYCE NAME STREET ADDRESS 13925 LAKE MAJDALENE BLVD. CITY-ST-7IP **TAMPA, FL 33618** TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP MLE NAME

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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED