## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## FILED Feb 05, 2007 08:00 AM **DOCUMENT # 301059 Secretary of State** 1. Entity Name TEAL & SONS, INC. Principal Place of Business Mailing Address 520 N. WOODLAND ST. WINTER GARDEN FL 34787 13348 REAMS RD WINDERMERE FL 34786 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suita, Apt. #, etc. Suite, Apt. #, otc. 1st MOORE CR2E034 (10/06) City & State City & Stato 4. FEI Number Applied For 59-1204299 Not Applicable Zip Country Country Zio \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOAN H TEAL GRIFFIN 520 N. WOODLAND ST. Street Address (P.O. Box Number is Not Acceptable) WINTER GARDEN FL 34787 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. 2-2-07 DATE SIGNATURE (NOTE: Registered Agent signature required when reinstating) e. typed or printed name of registered agent and title r applicable. FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS TITLE ☐ Delete ITHE ☐ Change ☐ Addition U00000623538 TEAL, HILTON P. (DECEASE NAME NAME 02/13/07-80069-025 150.00 520 N WOODLAND ST STRLET ADDRESS STREET ADDRESS WINTER GARDEN FL CITY-ST-ZIP CITY-S1-ZIP THE ☐ Defete Mil ☐ Change ☐ Addition GRIFFIN, JOAN H NAME NAME 520 N. WOODLAND ST. STREET ADDRESS STREET ADDRESS WINTER GARDEN FL 34787 CITY-S1-ZIP CITY-ST-ZIP ☐ Delele HTLE ☐ Change ☐ Addition TEAL, WILLIAM H. NAME NAME 1629 SUNSET DR STREET ADDRESS STREET ADDRESS CITY+S1-7IP CLERMONT FL 34711 CITY-SI-ZIP TITLE Delete TITLE Change ☐ Addition TEAL, PAUL H., JR. NAME NAME 199 S BEAR POINTE STREET ADDRESS STREET ADDRESS LAKE PLACID FL 33852 CITY-ST-7IP CITY-ST-ZIP 11111 ☐ Delete TITLE ☐ Change ☐ Addition TEAL, JULIA K NAME NAME 3204 BERRIDGE LN STREET ADDRESS STREET ADDRESS ORLANDO FL 32812 CITY ST ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition TEAL, JANET M NAME NAME 520 N WOODLAND ST STREET ADDRESS STREET ADDRESS WINTER GARDEN FL 34787 CITY-ST-ZIP CITY - ST - ZIP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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.