


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 08:00 A
Secretary of State

DOCUMENT # 314471 1. Entity Name DELAND METAL CRAFT COMPANY	
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Principal Place of Business 300 W BRESFORD AVE DELAND, FL 32720	Mailing Address 300 W BRESFORD AVE DELAND, FL 32720
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03042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1198895	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RAY, EDWARD J 300 W BERESFORD AVENUE DELAND, FL 32720	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WHITAKER, BROOKE 305 E. 2ND AVE PIERSON, FL 32180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAY, EDWARD 300 STEWART AVE DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WHITAKER, JEFFREY 305 E 2ND AVE PIERSON, FL 32180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SODEN, GARY 300 W BERISFORD AVE ORLANDO, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

1000000850597
03/25/08-80003-022-150.00

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>Brooke Whitaker</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	3/5/08 Date	384-734-0828 Daytime Phone #
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