2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 21, 2007 8:00 am **Secretary of State DOCUMENT # 316363** 1. Entity Name 03-21-2007 90040 041 ***150.00 WARREN G. ARNETT INC. Principal Place of Business Mailing Address 745 N THORNTON AVE 745 N THORNTON AVE ORLANDO FL 32803 ORLANDO FL 32803 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apl. #, etc 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-1162860 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LARSEN, RICHARD E 55 E. PINE STREET Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 City 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 lamiliar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 11111 T Delete HHE ☐ Change X Addition ARNETT, HOWARD M NAME Mildred A. Arnett NAME 745 N. THORNTON AVE. STREET ADDRESS STREET ADDRESS 745 N. Thornton Ave. ORLANDO FL 32803 CHY-ST-ZIP CITY ST ZIP Orlando, FL 32803 ☐ Defete Change X Addition BATES, MARY Howard M. Arnett NAME NAME 745 N. THORNTON AVE. STREET ADDRESS STREET ADDRESS 745 N. Thornton Ave. ORLANDO FL 32803 CHY ST ZIP CITY ST ZIP Orlando, FL 32803 HHE Dalata. 11111 NAMI NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP HIU ☐ Delete □ Change ■ Addition NAME NAM STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY ST 7IP ☐ Delete HILE Addition Change NAML STREET ADDRESS STRUET ADDRESS CITY ST-ZIP CITY ST ZIP IIII ☐ Delete HILL Change Addition NAME NAME STREET ADORESS STREET ADDRESS CHY-ST-7IP CHY ST ZIP

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12. 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 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: Mildred A. Arnett