FILED Mar 17, 2008 08:00 A Secretary of State

			RE <u>PORT</u>	110
DOC	UMENT # 32	24871		
1. Entity	Name			

Principal Place of Business

Mailing Address

234 S 6TH AVE P.O. BOX 1149 234 S 6TH AVE

WAUCHULA, FL 33873

P.O. BOX 1149 WAUCHULA, FL 33873



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CR2E034 (11/05) 03062008 No Chg-P

4. FEI Number 59-1201553

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, JOE L JR PO BOX 1149 234 SOUTH 6TH AVE WAUCHULA, FL 33873

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE_					And the second second second second	
- SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable (NOTE: Registered /	Agent signature	required when reinstating)	, DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAVIS, JOE L SR PO BOX 1149 WAUCHULA, FL 33873					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DAVIS, JOE L.,JR. 322 NE MANLEY RD., PO BOX 1149 WAUCHULA, FL 33873				U00000860379 04/02/08-80059-009 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD O'NEAL, JOHN H PO BOX 1149., 234 S 6 ST WAUCHULA, FL 33873		,	DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		and the second of the second o		-6,00 hay Fe	e de la companya de l La companya de la companya de	,
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.						

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