2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 352984

1. Entity Name
CELADOR CORPORATION

66002307

Principal Place of Business	Mailing Address
912 PERRIN AVE	912 PERRIN AVE
WINTER HAVEN, FL 33881	WINTER HAVEN, FL 33881 US

DO NOT WRITE IN THIS SPACE

01222007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-0874087	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WOTEN,H GLENN
912 PERRIN AVE
WINTER HAVEN, FL 33880

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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 _____ PRES H.G. WOTEN _____ 1-25-07

Signature typed or printed name of registered agent and title 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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WOTEN,H GLENN
STREET ADDRESS	912 PERRIN AVENUE
CITY-ST-ZIP	WINTER HAVEN, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____ PRES H.G. WOTEN _____ 2-16-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

863-261-1709