## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** Jan 10, 2008 08:00 AM Secretary of State **DOCUMENT #393588** 1. Entity Name DON SAUNDERS, INC. Principal Place of Business Mailing Address 1721 SPRING LAKE DR. 1721 SPRING LAKE DR. ORLANDO, FL 32804 US ORLANDO, FL 32804 01082008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1370942 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUNTER, DANIEL DO NOT WRITE 243 W. PARK AVENUE WINTER PARK, FL 32789 IN THIS SPACE 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.  $\Sigma M(r) = - \sqrt{r} r$ . Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME SAUNDERS, DON B STREET ADDRESS 1721 SPRING LAKE DR. CITY-ST-7IP ORLANDO, FL 32804 U00000777550 01/10/08-80013-006 150.00 TITLE NAME SAUNDERS, DON B. STREET ADDRESS 1721 SPRING LAKE DR. CITY-ST-ZIP ORLANDO, FL 32804 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TIT! F NAME. STREET ADDRESS your intes 200 00 KPA 96 NAME STREET ADDRESS CITY-ST-ZIP

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 of supplemental leport 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 muster employered 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:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

SAJNOERS

08/08

107-920-121