

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 588910

Entity Name: FANNCO, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

1010 SO. NOVA RD.
ORMOND BEACH, FL 32174

New Principal Place of Business:

1010 SOUTH NOVA ROAD
ORMOND BEACH, FL 32174 US

Current Mailing Address:

1010 SO. NOVA RD.
ORMOND BEACH, FL 32174

New Mailing Address:

1010 SOUTH NOVA ROAD
ORMOND BEACH, FL 32174 US

FEI Number: 59-1855459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FANNING, MICHAEL J TREAS
6 PEBBLE BEACH DRIVE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FANNING, NANCY,
Address: 102 UNIVERSITY CIR
City-St-Zip: ORMOND BEACH, FL 32176 US

Title: V () Delete
Name: DAVIS, JOHN R,
Address: 2240 LIPIZZAN TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: T () Delete
Name: FANNING, MICHAEL
Address: 6 PEBBLE BEACH DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: S () Delete
Name: FANNING, NANCY
Address: 102 UNIVERSITY CIR
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FANNING, NANCY,
Address: 6 PEBBLE BEACH DRIVE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: FANNING, NANCY
Address: 6 PEBBLE BEACH DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J .FANNING

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04/28/2008

Electronic Signature of Signing Officer or Director

Date