

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 09, 2008 08:00 AM
Secretary of State

DOCUMENT # 602021

1. Entity Name
**OSBURN, HENNING & COMPANY, C.P.A.'S,
PROFESSIONAL ASSOCIATION**



Principal Place of Business
**617 E COLONIAL DRIVE
ORLANDO, FL 32803**

Mailing Address
**617 E COLONIAL DRIVE
ORLANDO, FL 32803**



05282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1296653	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LACY, LONNIE H
617 EAST COLONIAL DRIVE
ORLANDO, FL 32803**

**DO NOT WRITE
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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDT LACY, LONNIE H. 617 E COLONIAL DR ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD PILHORN, RICHARD L 617 E COLONIAL DR ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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06/03/08-80075-024 150.00

**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: Richard L. Pilhorn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/29/08
Date

407-896-8021
Daytime Phone #