


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 602890</b>	
1. Entity Name DUGGAN, JOINER & COMPANY, P.A., CERTIFIED PUBLIC ACCOUNTANTS	

Principal Place of Business 334 NW 3RD AVENUE OCALA, FL 34475	Mailing Address 334 NW 3RD AVENUE OCALA, FL 34475
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**DO NOT WRITE IN THIS SPACE**



02222008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1349759	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

STAFFORD, FRANK E JR  
334 N.W. 3RD AVE.  
OCALA, FL 34475

**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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000838189 03/05/08-80017-020 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STAFFORD, FRANK E 334 N.W. 3RD AVE. OCALA, FL 34475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FURMAN, EDWARD J 334 N.W. 3RD AVE OCALA, FL 34475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T O.H., DANIELS JR. 334 N.W. 3RD AVE. OCALA, FL 34475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BLEDSON, R. PHILLIP 334 NW 3RD AVE OCALA, FL 34475
TITLE NAME 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: Frank E. Stafford Jr. PRESIDENT Date: 2/22/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR