2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008
Secretary of State

DOCUMENT# 635166

Entity Name: PAUL SIMS ENTERPRISES, INC.

Current Principal Place of Business:

402 PROGRESS RD
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

419 QUAIL HOLLOW RD.
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 59-2086270 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMS, PAUL
419 QUAIL HOLLOW RD
AUBURNDALE, FL 33823 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: PD ( ) Delete
Name: SIMS, PAUL ALBERT,
Address: 419 QUAIL HOLLOW RD
City-St-Zip: AUBURNDALE, FL 33823 US

Title: ST ( ) Delete
Name: SIMS, JUDY,
Address: 419 QUAIL HOLLOW RD
City-St-Zip: AUBURNDALE, FL 33823 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP ( ) Change (X) Addition
Name: SIMS, ROBERT E
Address: 518 HILLSIDE DRIVE
City-St-Zip: AUBURNDALE, FL 33823

Title: VP ( ) Change (X) Addition
Name: SIMS, DAVID P
Address: 506 HILLSIDE DRIVE
City-St-Zip: AUBURNDALE, FL 33823

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: ALBERT PAUL SIMS PD 04/15/2008

Electronic Signature of Signing Officer or Director Date