## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #718000**

1. Entity Name



## **FILED** Jan 08, 2007 8:00 am Secretary of State 01-08-2007 90244 033 \*\*\*\*61.25

THE ADDRESS PROCED BUSINESS AND DIRECTORS  1 A Maining Address of Current Registered Agent  1 A Manual and Address of Current Registered Agent  1 A Manual and Address of Current Registered Agent  1 A Manual and Address of Current Registered Agent  1 A Manual and Address of Current Registered Agent  2 A Manual and Address of Current Registered Agent  2 A Manual and Address of Current Registered Agent  3 A Manual and Address of Current Registered Agent  4 A FEI Number  7 A Manual and Address of Manual Address of Current Registered Agent  7 A Manual and Address of Manual Address of Current Registered Agent  8 A Manual and Address of Current Registered Agent  1 A Manual and Address of Manual Address of Current Registered Agent  1 A Manual and Address of Manual Address of Current Registered Agent  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable)  1 A Manual and Address of Number is Not Acceptable in Number is Not		E 541, 40&8, INCORPORATE	ט							
Sulte, Apt. 4, etc.    City & State	3160 CHAM	BLEE LANE	3160 CHAMBLEE LANE	3160 CHAMBLEE LANE						
City & State  Ci	2. Principal Place of Business - No P.O. Box # 3.		3. Mailing Address							
Z2F Country Zp Country 5. Certificate of Status Desired	Suite, Apt. #, etc.		Suite, Apt. #, etc.		01042007 Ch	ng-NP CR2E037 (*	12/06)			
ESTIBONE: JOHN Street and Address of Current Registered Agents 7. Name and Address of Naw Registered Agents 7. Name and Address of Naw Registered Agent 8.	City & Stat	te 🔏	City & State		4. FEI Number 23-737166	0	<del>                                      </del>			
PETTIBONE: JOHN 3160 CHAMBLEE LANE CLEARWATER, FL 33759-3707  6. The above namind existly submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  Filing Fee is \$61.25  Due by Mary 7:3007  Due by Mary 7:30	Zip	Ceuntry	Zip	Country	5. Certificate of Sta		75 Additional			
Street Address (P.O. Box Number is Not Acceptable)    City		6. Name and Address of Current Re	gistered Agent		7. Name and Addi	ress of New Registered Ager	nt			
Size Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Florida Jean milliar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the college of florida. I am familiar with, and accept the coll	PETTIRON	WE- IOHN .		Name						
8. The above natified gettly subhitis 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   Signa	3160 CHA	MBLEE LANE		Street Add	dress (P.O. Box Number is N	lot Acceptable)				
8. The above natified gettly subhitis 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   Signa										
SIGNATURE    SIGNATURE   Due by Mary 1, 2007   Policies   Policies	! t.			1 1	73.1.	rl (	·			
Superior Symposium interest agent and table if applications   (ACTE. Registered Agent argument interestating)   DATE	8. The above the obligat	named entity submits this statement for the name of registered agent.	he purpose of changing its re	egistered office or re	egistered agent, or both, in I	the State of Florida. I am famil	liar with, and accept			
Superior Symposium interest agent and table if applications   (ACTE. Registered Agent argument interestating)   DATE										
Filing Fee is \$61.25 Due by Birgy.17/2007  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE INAME MOSES, HENRY SR SIRETADORESS CITY-ST-2P  TITLE PD COX, TOM SIRETADORESS CITY-ST-2P  TITLE D ARTHUR, GEORGE SIRETADORESS CITY-ST-2P  TITLE D AGRICULTS DEVICE SIRETADORESS CITY-ST-2P  TITLE D DEIDE TITLE SD TITLE D DEIDE TITLE D DEIDE TITLE STRETADORESS CITY-ST-2P  TITLE D DEIDE TITLE STRETADORESS CITY-ST-2P  TITLE D DEIDE TITLE SIRETADORESS CITY-ST-2P  TITLE D DEIDE TITLE SIRETADORESS CITY-ST-2P  TITLE SIRETADORESS CITY-ST-2P  TITLE D DEIDE TITLE SIRETADORESS CITY-ST-2P  TITLE SIRETADORESS CITY-ST-2P  TITLE D DEIDE TITLE SIRETADORESS CITY-ST-2P  SIRETADORESS CITY-ST-2P  SIRETADORESS CITY-ST-2P  SIRETADORESS CITY-ST-2P  SIRETADORESS CITY-ST-2P  SIRETADORESS CITY-ST-2P  SIRETADORESS SIRETADORESS CITY-ST-2P  SIRETADORESS	SIGNATURE		· · · · · · · · · · · · · · · · · · ·				İ			
Trust Fund Contribution.   Added to Fees   Florida Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    TILE   SD		Signature, typedray printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signisture	required when remoteding)	DATE				
TITLE MAME MOSES, HENRY SR STRETADORESS CITY-ST-ZP CLEARWATER, FL 33763  TITLE MAME COX, TOM STRETADORESS CITY-ST-ZP CLEARWATER, FL 33764  TITLE MAME ARTHUR, GEORGE STRETADORESS CITY-ST-ZP TITLE MAME ARTHUR, GEORGE STRETADORESS CITY-ST-ZP LARGO, FL 33778  Delete MAME JEDREY, EDWARD C STRETADORESS CITY-ST-ZP MAME JEDREY, EDWARD C STRETADORESS CITY-ST-ZP MAME STRETADORESS CITY-ST-ZP STRETADORES		- with and								
ITILE MAME MOSES, HENRY SR STRETADORESS 2514 BAYBERRY DR CITY-ST-2P CLEARWATER, FL 33763  TITLE PD COX, TOM COX, TOM STRETADORESS CITY-ST-2P CLEARWATER, FL 33764  TITLE NAME ARTHUR, GEORGE 12734 111TH LN N. CITY-ST-2P LARGO, FL 33778  TITLE NAME JEDREY, EDWARD C STRETADORESS CITY-ST-2P CORGE, ARTHUR STRETADORESS CITY-ST-2P CORGE PARADISE CITY-ST-2P CORGE CITY-ST-2P CORGE PARADISE CITY-ST-2P CORGE CITY-ST-2P CORGE CITY-ST-2P CORGE CITY-ST-2P CORGE CITY-ST-2P CORGE CITY-ST-2P CORGE C					Added to Fees	гюпоа реракте	III OI SIZIE			
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this seport or supplemental report is true and excurred and that my inserting the state of the second of the	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	SD MOSES, HENRY SR 2514 BAYBERRY DR CLEARWATER. FL 33763 PD COX, TOM 2625 TEAKWOOD DR CLEARWATER. FL 33764 D ARTHUR, GEORGE 12734 111TH LN N. LARGO, FL 33778 D JEDREY, EDWARD C 6550 SHORELINE DR #7206 SAINT PETERSBURG, FL 33708 PD GEORGE, ARTHUR 12734 111TH LANE N. LARGO, FL 33778 D PAIRADEE. ARCHIE	☐ Delete ☐ Delete ☐ Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP   ADDITIONS/CHANGE	TIBONE 3LEE LANG R, FE. 33159	TORS IN 10  Change Addition  Change Addition  Change Addition  Change Addition				

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 617, 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 6 2007 727-725-2121