

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752542

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: 401 MANAGEMENT INC.

## Current Principal Place of Business:

401 NORTH ATLANTIC AVE.  
UNIT 103  
NEW SMYRNA BEACH, FL 321692559

## New Principal Place of Business:

## Current Mailing Address:

401 NORTH ATLANTIC AVE.  
UNIT 103  
NEW SMYRNA BEACH, FL 321692559

## New Mailing Address:

FEI Number: 59-2004609

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BLOCKER, JEFFERY H  
401 NORTH ATLANTIC AVE.  
UNIT 103  
NEW SMYRNA BEACH, FL 32169 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

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BRYAN, RUSSELL  
Address: P.O. BOX 2250  
City-St-Zip: UMATILLA, FL 32784

Title: VD ( ) Delete  
Name: BIEDENBACH, WILLIAM E  
Address: 1872 FAIRHILL ROAD  
City-St-Zip: ALLISON PARK, PA 15101

Title: D ( ) Delete  
Name: CHAPPELL, C.J.  
Address: 1271 OLD MILL ROAD  
City-St-Zip: ORLANDO, FL 32806

Title: T ( ) Delete  
Name: HOWE, J. DOUGLAS  
Address: 401 NORTH ATLANTIC AVE. # 102  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: FRY, THOMAS  
Address: 1245 OAK DALE STREET  
City-St-Zip: WINDERMERE, FL 34786

Title: DS ( ) Delete  
Name: DUNN, WILLIAM  
Address: 4 EAST VANDERBILT STREET  
City-St-Zip: ORLANDO, FL 32804

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T (X) Change ( ) Addition  
Name: BLOCKER, JEFFERY H  
Address: 401 NORTH ATLANTIC AVE. # 103  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFERY H BLOCKER

T

04/16/2007

Electronic Signature of Signing Officer or Director

Date