## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## **DOCUMENT # 768609** Mar 13, 2007 08:00 AM Secretary of State POST 312, HOLDING COMPANY, INC. Principal Place of Business Mailing Address 1610 67TH AVE, E. PO BOX 1269 ONECO FL 34264-1269 **ONECO FL 34264** 2. Principal Placo of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, atc. Suite, Apt. #, otc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-2011265 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YAKICH, HENRY Street Address (P.O. Box Number is Not Acceptable) 5724 13 ST E **BRADENTON FL 34203** Zip Code 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Change PD ☐ Delete TITLE ☐ Addition U00000665495 NAME YAKICH, HENRY NAME 03/23/07-80032-003 122.50 STREET ADDRESS 5724 13TH ST E STREET ADDRESS CITY-ST-7IP CITY-ST-7IP BRADENTON FL 34203 HITLE DV ☐ Delete IIILE ☐ Change Addition NAME COOK, RUSSELL NAME STREET ADDRESS STREET ADDRESS 3312 14TH ST E CITY-SI-ZIP C11Y-S1-7IP **BRADENTON FL 34208** Delete TITLE Change Addition FINO NAMÊ NAME BEYER, HOWARD STREET ADDRESS STREET ADDRESS 1618 66TH AVE TERR, E CITY-ST-ZIP CHY-SI-7IP SARASOTA FL 34243 TITLE ☐ Delete ☐ Change Addition THEE NAME NAME DAVIS, RICHARD STREET ADDRESS STREET ADDRESS 111 65TH AVE DR. W CITY-SI-7IP CHY-ST-ZIP SARASOTA FL 34243 Delete TIME THE ☐ Change Addition NAME STRUCT ADDRESS STREET ADDRESS CHY-ST-7IP C11Y-S1-7IP THLE ☐ Delete IIILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP CITY-ST-7IP

**FILED** 

Indicated on this report or supplimental 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.

SIGNATURE:

| Signature | S

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. I further certify that the information