2008 FOR PROFIT CORPORATION

FILED Apr 09, 2008 08:00 Al Secretary of State

ANNUAL REPORT	
DOCUMENT # 841215	Ĭ
1. Entity Name	1 /
PADGETT MANUFACTURING, INC.	ľ

Principal Place of Business

Mailing Address

2915 62ND AVE E. BRADENTON, FL 34203 2915 62ND AVE E. BRADENTON, FL 34203



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 04042008 No Chg-P Applied For

4. FEI Number 55-0577471 5. Certificate of Status Desired

Not Applicable \$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

SARASOT	NCOCK RD FA, FL 34240		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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	\$5.00 May Be Added to Fees	U00809888174 0472278-80801-616 150,90		
10.	OFFICERS AND DIREC	CTORS	的 海绵 "妈"			
NAME STREET ADDRESS CITY-ST-ZIP	P FOWLER, GEORGE 15874 HANCOCK RD SARASOTA, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOWLER, SHIRLEY 15874 HANCOCK RD SARASOTA, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FOWLER, SHIRLEY 15874 HANCOCK ROAD SARASOTA, FL 34240		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE						
INEE			■轉生 混合机造 医血压分析器	写 "我们就够得你会等的特别的最大概点,强烈的激励情况		

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.

STREET ADDRESS CITY-ST-ZIP

941-756-8566

\$ 150,00 Amit,