## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 842577** 

Address:

City-St-Zip:

2015 WEXFORD GREEN DRIVE

VALRICO, FL 33594

Entity Name: FOLKERSEN INTERESTS INC

FILED Apr 19, 2009 Secretary of State

Littly Name: FOLKERSEN INTERESTS INC.					
Current Principal Place of Business:			New Principal Place of Business:		
	FORD GREE FL 33594	N DR US			
Current Mailing Address:			New Mailing Address:		
PO BOX 2 VALRICO,	700 FL 33595270	00 US			
FEI Number	: 59-1879573	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
CROYLE, PHILIP J 370 W CAMINO GARDENS BLVD. #300 BOCA RATON, FL 33432 US					
	named entity of Florida.	submits this statement for the p	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent Date				Date	
Election Car	npaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FOLKERSEN,	RD GREEN DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	STD ( FOLKERSEN,	) Delete R EVYONNE	Title: Name:	( ) Change( ) Addition	

Address:

City-St-Zip:

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: R. EVYONNE FOLKERSEN STD 04/19/2009