

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90334 046 \*\*\*150.00

<b>DOCUMENT # 857221</b>					
<b>1. Entity Name</b> GEORGE E. WARREN CORPORATION					
<b>Principal Place of Business</b> 3001 OCEAN DRIVE 203 VERO BCH., FL 32963-1953			<b>Mailing Address</b> 3001 OCEAN DRIVE 203 VERO BCH., FL 32963-1953		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 04-1947720	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>  CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> Zip Code	
<b>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.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> SCHNEIDER, ROBERT A 123 SPRINGLINE DR VERO BEACH, FL 32960		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> MOREIN, MARK 657 LAKE DRIVE VERO BEACH, FL 32963	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> CORR, JOSEPH P 1502 E CAMINO DEL RIO VERO BEACH, FL 32963		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> CASAZZONG, RALPH W 170 ROUND HILL ROAD GREENWICH, CT 06831	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>TD</b> GEORGE, MICHAEL E 5010 ST JOSEPH'S ISLAND DR VERO BEACH, FL 32967		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>S</b> GOLDMAN, C. DAVID 340 MADISON AVE NEW YORK, NY 10017-4613	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> SMITH, TIMOTHY 167 ANCHOR DR VERO BEACH, FL 32963		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> CARDELFE, MICHAEL 111 PITNEY AVE. SPRING LAKE, NJ 07762	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> CORR, FRANCIS 7 RIDGELAND DR STUART, FL 34996		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>PD</b> CORR, THOMAS L 1265 LITTLE HARBOUR LANE VERO BEACH, FL 32963		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<b>PD</b> CORR, THOMAS L 630 LAKE DRIVE VERO BEACH, FL 32963	
<b>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.</b>					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>4/22/2008</b> Daytime Phone # <b>772-778-7100</b> <b>TREASURER</b>		