2008 FOR PROFIT CORPORATION

FILED Apr 08, 2008 08:00 Al State

ANNUAL REPORT				Secretary of S		
1. Entity Nam	MENT # F020000022 o distributing company	•				
Principal Place 17035 MARI FORT MYERS	NA COVE LANE	Mailing Address 17035 MARINA COVE LANE FORT MYERS, FL 33908			10 1157 BUN	INITE IIDIO STII DINII IODIREI IE IDDI
	O NOT WRITE	IN THIS SPA	CF	03132008		R2E034 (11/05)
· · · · · · · · · · · · · · · · · · ·		:		4. FEI Number 34-09754 5. Certificate of		Not Applicable
	6. Name and Address of Current Re	gistered Agent				:
HEDGES, EDGAR W 17035 MARINA COVE LANE FT MYERS, FL 33908			DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for the ions of registered agent. A grant was a grant with the statement for the ions of registered agent and include the include the ions of registered agent and include the ions of registered agent.	Syst applicable (NOTE: Registers	rd Agent signature required	I when re-instating)	3/2	I am familiar with, and accept
FiL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	 Election Campaign Final Trust Fund Contribution. 		.00 May Be ed to Fees	U000008	86549 0063-001-150-00
10.	OFFICERS AND DI	RECTORS	4		04/10/00 C	NOTE TOOLOG
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEDGES, EDGAR W 17035 MARINA COVE LANE FT MYERS, FL 33908	·				
TITLE NAME STREET ADDRESS	VD MANDOVI, NANCY 55 RIVERSTONE DR.			·· ·		
CITY-ST-ZIP	MORELAND HILLS, OH 44022				en e	
NAME STREET ADDRESS CITY-ST-ZIP	MANDOVI, ALI 10153 BLAIR LANE KIRTLAND, OH 41094		:	DO N	NOT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			IN T	HIS SPA	CE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE			1		:	

12. I hereby certify that the information supplied with this filling 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 tike empowered.

SIGNATURE: _

STREET ADDRESS

Daytime Phone #