## 2008 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Apr 17, 2008 08:00 A Secretary of State **DOCUMENT # F05000000857** 1. Entity Name ARCADIA GENERAL CORPORATION Mailing Address Principal Place of Business 3182 NE TURNER RD. 3182 NE TURNER RD. ARCADIA, FL 34266 ARCADIA FL 34266 CR2E034 (11/05) 04092008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3516672 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE STURGES, ERNEST 3182 NE TURNER RD. ARCADIA, FL 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) <del>- U00000903491</del> 04/30/08-80048-006 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS CP TITLE NAME STURGES, ERNEST STREET ADDRESS 3182 NE TURNER RD. CITY-ST-ZIP ARCADIA, FL 34266 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE MILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

RINTED NAME OF SIGNING OFFICER OR DIRECTOR