

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F05000001958

**FILED**  
**Jul 22, 2007**  
**Secretary of State**

**Entity Name:** FAMILY PRIDE CORPORATION OF TRANQUILITY BAY

**Current Principal Place of Business:**

2600 OVERSEAS HIGHWAY  
UNIT #20  
MARATHON, FL 33050

**New Principal Place of Business:**

**Current Mailing Address:**

2018 CHEROKEE BLVD.  
KNOXVILLE, TN 37919

**New Mailing Address:**

**FEI Number:** 62-1539795

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DOVER, EDWARD L  
403 SWEETWATER BLVD. NORTH  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: DOVER, LUCY  
Address: 1489 TOURAINE PLACE  
City-St-Zip: KNOXVILLE, TN 37919

Title: GM ( ) Delete  
Name: DOVER, RICHARD E  
Address: 2018 CHEROKEE BLVD.  
City-St-Zip: KNOXVILLE, TN 37919

Title: SEC (X) Delete  
Name: DOVER, LAURIE L  
Address: 2018 CHEROKEE BLVD  
City-St-Zip: KNOXVILLE, TN 37919

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC (X) Change ( ) Addition  
Name: DOVER, LAURIE L  
Address: 2018 CHEROKEE BLVD.  
City-St-Zip: KNOXVILLE, TN 37919

Title: ( ) Change ( ) Addition  
Name:  
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: LAURIE DOVER

SEC

07/22/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date