

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2007 08:00 AM
Secretary of State

DOCUMENT # F21480 1. Entity Name SAUNDRY ASSOCIATES, INC.			
Principal Place of Business 9220 BONITA BEACH RD. SUITE 215 BONITA SPRINGS, FL 34135		Mailing Address 9220 BONITA BEACH RD. SUITE 215 BONITA SPRINGS, FL 34135	
DO NOT WRITE IN THIS SPACE			
			
		01102007 No Chg-P CR2E034 (11/05)	
4. FEI Number 59-2069372		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPARTA, DENISE A 9220 BONITA BEACH RD. STE. 215 BONITA SPRINGS, FL 34135		DO NOT WRITE 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		000000590217 01/18/07-80048-012 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAUNDRY, KENNETH P. 9220 BONITA BEACH RD. BONITA SPRINGS, FL 34135	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SAUNDRY, KENNETH P, JR 9220 BONITA BEACH RD. BONITA SPRINGS, FL 34135		
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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.			
SIGNATURE: 		1-10-07 239-498-9026	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	