2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # F87551

1. Entity Name
THERON ENTERPRISES, INC.

Principal Place of Business	Mailing Address
5 BARRACUDA LANE OCEAN REEF CLUB NORTH KEY LARGO, FL 33037 US	5 BARRACUDA LANE OCEAN REEF CLUB NORTH KEY LARGO, FL 33037 US

DO NOT WRITE IN THIS SPACE

03032008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2199233
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GOING, WILLIAM
29430 S.W. 182 AVENUE
HOMESTEAD, FL 33030

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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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	GOING, WILLIAM
STREET ADDRESS	29430 SW 182 AVE
CITY-ST-ZIP	HOMESTEAD, FL
TITLE	STD
NAME	GOING, RITA
STREET ADDRESS	29430 SW 182 AVE
CITY-ST-ZIP	HOMESTEAD, FL
TITLE	PD
NAME	GOING, DUANE
STREET ADDRESS	29430 SW 182 AVE
CITY-ST-ZIP	HOMESTEAD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/08/08-80030-007 158.75

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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: Christa M Going Sec Treas 3/15/08 305-246-0261
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #