

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005007

FILED  
Feb 20, 2008  
Secretary of State

Entity Name: FOUR/FOUR CORPORATION OF DELAWARE, INC.

## Current Principal Place of Business:

2804 MAGNOLIA WOODS  
FERNANDINA BEACH, FL 32034

## New Principal Place of Business:

## Current Mailing Address:

BOX 15159  
FERNANDINA BEACH, FL 32035

## New Mailing Address:

FEI Number: 37-0889780

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: EVANS, JOSEPH O  
Address: 2804 MAGNOLIA WOODS  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: CST ( ) Delete  
Name: EVANS, BARBARA M  
Address: 2804 MAGNOLIA WOODS  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: DV (X) Delete  
Name: EVANS, DANIEL M  
Address: 3726 SAPPHIRE  
City-St-Zip: MARTINEZ, GA 30907

Title: DV (X) Delete  
Name: ROBSON, JENNIFER E  
Address: 123 COMPO RD S  
City-St-Zip: WESTPORT, CT

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: EVANS, DANIEL M  
Address: 3804 INVERNESS WAY  
City-St-Zip: MARTINEZ, GA 30907

Title: D (X) Change ( ) Addition  
Name: ROBSON, JENNIFER  
Address: 123 COMPO ROAD SOUTH  
City-St-Zip: WESTPORT, CT 06880

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

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: DANIEL M. EVANS

D

02/20/2008

Electronic Signature of Signing Officer or Director

Date