2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004670

Entity Name: ANCHOR SYSTEMS, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1674 EDITH ESPLANADE CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

944 COUNTRY CLUB BLVD.

SUITE 110

CAPE CORAL, FL 33999

923 DEL PRADO BLVD S
SUITE 206
CAPE CORAL, FL 33999

CAPE CORAL, FL 33990

FEI Number: 58-2195145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FISH, LAURA F
944 COUNTRY CLUB BLVD.
SUITE 110
CAPE CORAL, FL 33990 US
FISH, LAURA F
923 DEL PRADO BLVD S
SUITE 206
CAPE CORAL, FL 33990 US
CAPE CORAL, FL 33990 US

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: 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 FISH, LAURA F
 Name:
 FISH, LAURA F

 Address:
 944 COUNTRY CLUB BLVD, SUITE 110
 Address:
 923 DEL PRADO BLVD S, STE 206

 City-St-Zip:
 CAPE CORAL, FL 33990 US
 City-St-Zip:
 CAPE CORAL, FL 33990 US

Title: V () Delete Title: V (X) Change () Addition

Name: FISH, VERN E Name: FISH, VERN E

Address: 944 COUNTRY CLUB BLVD, STE 110 Address: 923 DEL PRADO BLVD S, STE 206 City-St-Zip: CAPE CORAL, FL 33990 US City-St-Zip: CAPE CORAL, FL 33990 US

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: LAURA F FISH P 04/30/2007