


**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F98000006142</b> 1. Entity Name <b>NINEPATCH, INC.</b>	
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Principal Place of Business <b>1014 NW 52ND TERR GAINESVILLE, FL 32605</b>	Mailing Address <b>1014 NW 52ND TERR GAINESVILLE, FL 32605</b>
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06302007 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>38-3271588</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>OGLE, FRANCES R 1014 NW 52ND TERR GAINESVILLE, FL 32605</b>
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**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 Frances R. Ogle DATE June 30, 2007  
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
Due by September 14, 2007**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P OGLE, FRANCES R 1014 NW 52ND TERR GAINESVILLE, FL 32605
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AD KRUZEL, GEORGENE 2716 DALERIDGE PL SPRING VALLEY, CA 91977
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AD POUCHER, JUNE PO BOX 1027 WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U000000767153  
07/06/07-80002-020 61.25

**DO NOT WRITE  
IN THIS SPACE**

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frances R. Ogle DATE June 30, 2007 352  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 395-658  
Daytime Phone #