## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2008 08:00 A Secretary of State

850-234-3836

Oaytime Phone #

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1. Entity Nam	MENT # G21760 • ANAGEMENT, INC.	7				Secre	tary of St
9527 CLARE		Mailing Address 11040 HUTCHISON BLVD PANAMA CITY BEACH, FL 324	07 US				
DO NOT WRITE IN THIS SPACE			CE	03012008 No Chg-P CR2E034 (11/05)  4. FEI Number			
	6. Name and Address of Current Reg II, ROY TCHISON BLVD CITY BEACH, FL 32407	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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent a gnature required when reinstating)  DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	ncing \$5.	00 May Be ed to Fees				
10.	OFFICERS AND DIRI	ECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVT CENTANNI, ROY J 11040 HUTCHISON BLVD PANAMA CITY BEACH, FL 32407				Heade	10884531	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CENTANNI, LINDA 11040 HUTCHISON BLVD PANAMA CITY BEACH, FL 32407						)19 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP						•	

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 AND SYPEPTOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: