

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90056 012 ***150.00

DOCUMENT # G37477 1. Entity Name PETER MORTON ENTERPRISES, INC.			
Principal Place of Business 4301 32ND ST W #B-20 BRADENTON, FL 34205 US		Mailing Address 4301 32ND ST W #B-20 BRADENTON, FL 34205 US	
2. Principal Place of Business - No P.O. Box # 6071 DEACON ROAD		3. Mailing Address 6071 DEACON ROAD	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State SARASOTA, FL		City & State SARASOTA, FL	
Zip 34238		Zip 34238	
Country U.S.A.		Country U.S.A.	
4. FEI Number 65-0126799		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MORTON, PETER 4301 32ND ST W #B-20 BRADENTON, FL 34205		7. Name and Address of New Registered Agent Name PETER MORTON Street Address (P.O. Box Number is Not Acceptable) 6071 DEACON ROAD City SARASOTA, FL Zip Code 34238	
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 <small>Signature, typed or printed name of registered agent and title if applicable.</small>		PETER MORTON, PRES. 1/17/08 <small>(NOTE: Registered Agent signature required when reinstating) DATE</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MORTON, PETER 4301 32ND ST W #B-20 BRADENTON, FL 34205	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MORTON, PETER 4301 32ND ST W #B-20 BRADENTON, FL 34205	<input type="checkbox"/> Delete	6071 DEACON ROAD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:		PETER MORTON 1/17/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date</small>	
		(941) 922-7582 <small>Daytime Phone #</small>	