


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 08:00 A
Secretary of State

DOCUMENT # G41530 1. Entity Name DEMETREE BROTHERS, INC.	
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Principal Place of Business P.O. BOX 47050 JACKSONVILLE, FL 32247-7050	Mailing Address P.O. BOX 47050 JACKSONVILLE, FL 32247-7050
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04032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2308751	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

DEMETREE, JACK C., JR.
 3740 BEACH BLVD.
 SUITE 300
 JACKSONVILLE, FL 32207

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DEMETREE, MARK C 3740 BEACH BLVD #300 JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD DEMETREE, J. C., JR. 3740 BEACH BLVD #300 JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD DEMETREE, JACK C. 3740 BEACH BLVD. #300 JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DEMETREE, CHRISTOPHER C. 3740 BEACH BLVD #300 JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNN, M. HARRIS 3740 BEACH BLVD #300 JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/18/07-80078-009 300.00

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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: *J. C. Demetree* 4/24/07 (904) 398-7350
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #