## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** Apr 28, 2008 08:00 AM Secretary of State

1. Entity Name	MENT # G79392 actor, inc.					Secreta	ary of Sta
Principal Place 211 MILLER I ORANGE CITY	ROAD	Mailing Address 211 MILLER ROAD ORANGE CITY, FL 32763			1 (GRIS 16108 17) S 18178 (1818	. G(8)  F(8)  E(8)  G(8)	3 BYSIA GIRYIBRI (1 1981
				-			
	DO NOT WRITE IN THE CRA			04232008	No Chg-P	CR2E034 (	11/05)
DO NOT WRITE IN THIS SPA			CE	4. FEI Numb 59-236			Applied For Not Applicable
				5. Certificate	of Status Desired		75 Additional Required
	6. Name and Address of Current Reg	istered Agent		•			
LACONTE, RICHARD, JR. 211 MILLER ROAD ORANGE CITY, FL 32763			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the ons of registered agent	purpose of changing its register	ed office or registe	ered agent, or bo	ith, in the State of Flo		iar with, and accept
	Signature, typed or printed name of registered agent and to	le il applicable (NOTE Registere	ed Agent signatura require	ed when renatating)		DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign F Trust Fund Contribut				5.00 May Be ded to Fees	* • *		~
10.	OFFICERS AND DIR	ECTORS			<del></del>		<del></del>
NAME STREET ADDRESS CHY-SI-ZIP	P LACONTE, RICHARD, JR. 211 MILLER RD ORANGE CITY, FL 32763						
NAME SIREET ADDRESS CITY-SI-ZIP					00000 05/21/08	10929140 1-80057-0	11 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 of 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** 

TITLE NAME STREET ADDRESS

THLE NAME STREET ADDRESS CITY-S1-ZIP THILE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP