2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G81129

Entity Name: F-P-P, INC.

City-St-Zip:

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O BARBARA PETTI 6800 SW 66TH ST OCALA, FL 326762526 **Current Mailing Address: New Mailing Address:** C/O BARBARA PETTI C/O BARBARA PETTI 6800 SW 66TH ST 6800 SW 66TH ST OCALA, FL 344762526 US OCALA, FL 326762526 FEI Number: 59-2392164 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PETTI, BARBARA 6800 SW 66TH ST OCALA, FL 34476 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PETTI, BARBARA Name: Name: 6800 S. W. 66TH ST. Address: Address: City-St-Zip: OCALA, FL City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: FULLER, BEVERLY J Name: FULLER, BEVERLY J 2506 264TH ST Address: 9740 SW 100TH STREET Address: OCALA, FL 34481 O BRIEN, FL 32071

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA PETTI PD 04/14/2009