## **2007 FOR PROFIT CORPORATION** ANNUAL REPORT (AR)

## May 07, 2007 8:00 am Secretary of State DOCUMENT # G91032 1. Entity Name 05-07-2007 90054 006 \*\*\*150.00 DINNER BELL, INC. Principal Place of Business Mailing Address 12084 S. WILLIAMS ST. 12084 S. WILLIAMS ST. **DUNNELLON FL 34432 DUNNELLON FL 34432** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 12094 12094 Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number 59-2419681 City & Stale City & State Applied For DUNDELLON DUNNELLO N Not Applicable \$8.75 Additional 5. Certificate of Status Desired 34432 34432 us Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LOVE, EDWARD J JR Street Address (P.O. Box Number is Not Acceptable) 11620 CAMP DR. **DUNNELLON FL 34432** Zip Code 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 agont. POC (NOT): Registered Agent signature registed when reinstating) FILE NOW!!! FEE.IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. HHI BHE Delete LOVE, JR., EDWARD J NAM NAMI 11620 CAMP DR. STREET LADDRESS STREET ADDRESS **DUNNELLON FL 34432** CITY ST ZIP CHY S1-ZIP STD ш Delete 001 LAMONTE E. LOUE STA ☐ Channe Addition EDISON, JOHN C., JR. RANDALL L. LOVE 2358 W. FOXELOUE CT. NAME NAME 20510 S.W. 36TH ST. SIRFET ADDRESS STREET ADDRESS **DUNNELLON FL 34431** CHY ST ZIP CHY ST ZIP QUNNOCLON FL 34434 VD Delete ша ☐ Change Addition IIIII ROLAND, AMY L invaivit 11533 MOCKINGBIRD DR. STREET ADDRESS STREET ADDRESS **DUNNELLON FL 34432** CHY ST 7IP CHY ST ZIP Delete HHIChange ☐ Addition HILL NAML NAMI STREET ADDRESS STREET ADDRESS CITY ST ZIP CHY ST ZIP ☐ Delete ши ☐ Change ■ Addition HILLE NAME MAM STREET ADDRESS STRUET ADDRESS CUTY-ST-ZIP CHY ST ZIP ☐ Delete Hill Change Addition NAM NAM SIDELL ADDRESS STREET ADDRESS CITY ST ZIP 12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

**FILED**