


**FILED**  
**Apr 16, 2008 08:00 AM**  
**Secretary of State**

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT # H28112**  
 1. Entity Name  
**ANSORG ENTERPRISES, INC.**



Principal Place of Business      Mailing Address  
 17886 STONEBRIDGE CT      P.O. BOX 480355  
 BOCA RATON, FL 33498 US      DELRAY BEACH, FL 33448 US



04112008    No Chg-P    CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
**59-2459782**      Not Applicable

5. Certificate of Status Desired        **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**ANSORG, MICHAEL**  
 17886 STONE BRIDGE COURT  
 BOCA RATON, FL 33498

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

1000000501399  
 04/29/08-80067-017 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	ANSORG, MICHAEL P.
STREET ADDRESS	17886 STONEBRIDGE CT.
CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE	D
NAME	ANSORG, PATRICIA M.
STREET ADDRESS	17886 STONEBRIDGE CT.
CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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.

*Patricia M. Ansorg*  
 PATRICIA M. ANSORG

*4/11/08*