

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60700

Entity Name: PADRO F CORPORATION

FILED
Jan 17, 2007
Secretary of State

Current Principal Place of Business:

800 EAST BAY DRIVE
SUITE 1
LARGO, FL 33770

Current Mailing Address:

800 EAST BAY DRIVE
SUITE 1
LARGO, FL 33770

New Principal Place of Business:

800 EAST BAY DRIVE
SUITE G
LARGO, FL 33770

New Mailing Address:

800 EAST BAY DRIVE
SUITE G
LARGO, FL 33770

FEI Number: 59-2547928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLM, ROBERT N
800 EAST BAY DRIVE, SUITE I
LARGO, FL 33770 US

Name and Address of New Registered Agent:

HOLM, ROBERT N
800 EAST BAY DRIVE, SUITE G
LARGO, FL 33770 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: ROBERT N. HOLM

01/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HOLM, ROBERT W
Address: 18522 GULF BLVD. UNIT E
City-St-Zip: INDIAN SHORES, FL 33785

Title: VP () Delete
Name: ZIEMACK, MARCI H
Address: 8820 GULF BLVD.
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

Title: S () Delete
Name: FINCHER, DARLENE H
Address: 4315 LEONA STREET
City-St-Zip: TAMPA, FL 33629

Title: T () Delete
Name: WILLS, GLADYS H
Address: 9180 GULF BLVD.
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DR () Change (X) Addition
Name: COLECCHIA, KARA S
Address: 2775 VALENCIA LANE WEST
City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the 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: KARA S. COLECCHIA

DR

01/17/2007

Electronic Signature of Signing Officer or Director

Date