## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# H81406

FILED Dec 20, 2007 Secretary of State

Entity Nar	ne: PAUL N	ELSON, II	NC.					
Current Principal Place of Business:					New Principal Place of Business:			
692 VILLA POMPANO	GE DRIVE D BEACH, FL	33060						
Current Mailing Address:				New Mailing Address:				
692 VILLA POMPANC	GE DRIVE D BEACH, FL	33060						
FEI Number:	34-0836291	FEI Nui	mber Applied For()	FEI Nun	nber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
NELSON, 692 VILLA POMPANO		33060	US					
The above in the State	named entity of Florida.	submits t	his statement for the p	urpose o	f changing i	ts registere	ed office or registered agent, or both,	
SIGNATUF	RE:							
	Electro	nic Signa	ture of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PT ( NELSON, PAU 692 VILLAGE POMPANO BE	DR.	3060		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	(	) Delete			Title: Name: Address: City-St-Zip:		()Change(X)Addition ARTHA N KILLARNEY LN OR 97062 US	
Title: Name: Address: City-St-Zip:	(	) Delete			Title: Name: Address: City-St-Zip:		() Change (X) Addition ATRICIA N STWICK CIRCLE GA 30097 US	

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: PAUL M. NELSON Ρ 12/20/2007