


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2007 08:00 A
Secretary of State

DOCUMENT # H83958 1. Entity Name YOU'VE GOT IT COMING, INC.	
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Principal Place of Business % ROGER N. ARBURY 723 12TH AVENUE SOUTH NAPLES, FL 34102 US	Mailing Address % ROGER N. ARBURY 723 12TH AVENUE SOUTH NAPLES, FL 34102 US
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DO NOT WRITE IN THIS SPACE



03222007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2609452	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ARBURY, ROGER N. 723 12TH AVENUE SOUTH NAPLES, FL 34102

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST ARBURY, ROGER N. 723 12TH AVENUE SOUTH NAPLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KENYON, VICTOR R. 723 12TH AVENUE SOUTH NAPLES, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U000000716858 04/30/07-80025-002 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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.

SIGNATURE: Roger N. Arbury 4/16/07 (439) 261-2411
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ROGER N. ARBURY, SEC. TREAS