## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT #J06773

1. Entity Name PRJ, INC.

## FILED Feb 01, 2007 8:00 am **Secretary of State**

02-01-2007 90027 005 \*\*\*150.00

			1	I LEST					
Principal Plac 214 W. 23RD PANAMA CITY		Mailing Address 214 W. 23RD STREET PANAMA CITY, FL 324	_		40008072				
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address							
						*****	E(81) =(21)	) <b></b> 11 1000	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01292007	Chg-P	CR2E03	34 (12/06)		
City & State		City & State			4. FEI Number Applied For 59-2654808 Not Applicable				
Zip Country		Zip	Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required				
<del></del>	6. Name and Address of Current	Registered Agent	\	7. Name and	Address of New	Registered A	gent		
			Name						
MATHIS, H.P. 826 HARRISON AVENUE			Street A	Address (P.O. Box Number is Not Acceptable)					
	CITY, FL 32401								
			City			FL	Zip Code	9	
8. The above	named entity submits this statement lo	r the ourgose of changing its	registered office of	or registered agent, or both	h. in the State of f	Florida Lam (a	amiliar with	and accent	
	tions of registered agent.	, . ,	- 3	-9					
SIGNATURE									
SIGNATURES	Signature, typed or printed name of registered agent	and site if applicable. (NOT	E: Registered Agent signa	iture required when reinstating)		DATE			
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campa Trust Fund Conf		\$5.00 May Be Added to Fees		-			
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/	CHANGES TO OF	FICERS AND	DIRECTORS	3 IN 11	
TITLE	P	☐ Delete	TITLE		<u> </u>		☐ Change	Addition	
NAME	MATHIS, HARVEY P		NAME						
STREET ADDRESS CITY-ST-ZIP	826 HARRISON AVE		STREET ADDRESS CITY-ST-ZIP						
	PANAMA CITY, FL		<del></del>	<del> </del> -		<del></del>	Channe		
TITLE NAME	FULTON, JAMES W.	Delete	TITLE NAME				Change	Addition	
STREET ADDRESS	1320 BAYOU COURT		STREET ADDRESS						
CITY-ST-ZIP	PANAMA CITY, FL		City-S1-ZiP						
TITLE	VP	₩ Delete	TITLE				Change	Addition	
NAME	FULTON, RICHARD R	•	NAME						
STREET ADDRESS	906 BUENA VISTA BLVD		STREET ADDRESS						
CITY-ST-ZIP	PANAMA CITY, FL 32401		CITY-ST-ZIP					<b>773</b> A	
TITLE	\ <b>'</b>	☐ Delete	TITLE NAME	0	1500		☐ Change	Addition	
NAME STREET ADDRESS			STREET ADDRESS	MM. S FULL	11:07	Blud			
CITY-ST-ZIP			CITY-ST-ZIP	Am: 5 Full 906 Bueno Panama	7. 7. 5.	27Ux1			
7071.5		<i>□</i> 0.131.	TITLE	I UDEME C	· · · · · · · · · · · · · · · · · · ·	JU 701	Change	□ Addition	

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. If 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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

TITLE

NAME

SIGNATURE AND TREED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete

Date

☐ Change

☐ Change

Daytime Phone #

Addition

Addition