## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # J87731** 

MAYPORT ROAD SUBWAY, INC.



**FILED** Feb 14, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2292 MAYPORT RD.

JACKSONVILLE, FL 32233

1030 UNIVERSITY BLVD, NO. JACKSONVILLE, FL 32211



01042007

No Chg-P

CR2E034 (11/05)

4. FEI Number

59-2843623

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

FRANCO, PHILIP H. 1030 UNIVERSITY BLVD. NO. JACKSONVILLE, FL 32211

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8. The above the obligat	named entity submits this statement for the tions of registered agent.	purpose of changing its registered	office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered A	gent Bignature	required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financi Trust Fund Contribution.	ng `	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS	individual.	digitali est bilatest	grafit matigues to the state of
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NAME CIDET ADDRESS	FRANCO, PHILIP H.	Ċ,			All the first the walk of the test of the second of the se
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TITLE	V				ordinasi digenderita yang bigapap dan pengangan dan berandaran dan berandaran berandaran dan berandaran berand Bang Bangan bang bang bang bang bang bang bang
NAME	ADAMS, WALTER E.				
STREET ADDRESS	2522 FARRIER LANE		diadr.		
CITY-ST-ZIP	RESTON, VA 22091				
TITLE	ST				02/29/07-80024-016 150.00
NAME	FRANCO, FRED C.	10 10 10			न्ति हुने के मेरे अन्य अधिक है। एक के लिए हैं के लिए क
STREET ADDRESS	6939 RIVERSEDGE ST CIRCLE			no	NOT WRITE
CITY-ST-ZIP	BRADENTON, FL 342025				
TITLE				IN IN	THIS SPACE
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CITY-ST-ZIP					
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CITY-ST-ZIP				his of the	Carlo and the ca
12. I hereby o	ertify that the information supplied with this fi	ling does not qualify for the exemp	tions con	tained 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.