

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J96915

FILED
Apr 24, 2008
Secretary of State

Entity Name: CHEREDE CORPORATION

Current Principal Place of Business:

3225 13TH ST
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

2825 WILSON ROAD
SAINT CLOUD, FL 34772 US

New Mailing Address:

FEI Number: 59-2850448 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARL, BETTY S.
2825 WILSON ROAD
ST. CLOUD, FL 34772 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CARL, BETTY S
Address: 2825 WILSON RD
City-St-Zip: ST. CLOUD, FL

Title: DST () Delete
Name: LEWIS, SARA A.,
Address: 4501 NEPTUNE ROAD
City-St-Zip: ST. CLOUD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BETTY S CARL

DP

04/24/2008

Electronic Signature of Signing Officer or Director

_____ Date