## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # K23572

Entity Name

WARRENTON ENTERPRISES CORPORATION



Principal Place of Business

3785 AIRPORT ROAD, STE B-2 NAPLES, FL 34105 US Mailing Address

3785 AIRPORT ROAD, STE B-2 NAPLES, FL 34105 US

## FILED Feb 08, 2007 8:00 am Secretary of State

02-08-2007 90043 017 \*\*\*150.00

40011660



02052007

No Chg-P

CR2E034 (11/05)

FEI Number
 98-0049591

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANT, RICHARD C. 5551 RIDGEWOOD DRIVE SUITE 501 NAPLES, FL 33963

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

2/5/07

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Fir Trust Fund Contribution	nancing _	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				.*
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CUUNJIENG, WILLIAM R. 3785 AIRPORT ROAD, STE B-2 NAPLES, FL 34105				、 (	* *
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ANCANAN, NOEL L 3785 AIRPORT ROAD, STE B-2 NAPLES, FL 34105				1	
TITLE NAME ~ STREET ADDRESS CITY-ST-ZIP	VD CHAN, VICKI A. 3785 AIRPORT ROAD, STE B-2 NAPLES, FL 34105		. !	DO N	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ANCANAN, JOCELYN C 3785 AIRPORT ROAD, STE B-2 NAPLES, FL 34105	•		IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						e de la companya de l
TITLE NAME STREET ADDRESS CITY-ST-ZIP						e e e e e e e e e e e e e e e e e e e
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						

10 (ELYN MUCA NAM

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR