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

## Mar 28, 2007 08:00 AN **Secretary of State** DOCUMENT # K24720 SPARTY SPARTAN, INCORPORATED Principal Place of Business Mailing Address 357 GOLDSTONE COURT P.O. BOX 1163 ANDREWS, NC 28901 LAKE MARY, FL 32746 02032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 59-2893595 > Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, CURTIS D DO NOT WRITE 357 GOLDSTONE CT LAKE MARY, FL 32746 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 1/00000681436 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Added to Fees 04/04/07-80046-003 158.75 Trust Fund Contribution. After May 1, 2007 Fee Will be \$550.00 OFFICERS AND DIRECTORS 10. **PSD** TITLE NAME BRILL, TINA MARIE 373 GOLDSTONE COURT STREET ADDRESS CITY-ST-ZIP LAKE MARY, FL M BRILL, GREG MAME STREET ADDRESS 373 GOLDSTONE COURT CITY-ST-ZIP LAKE MARY, FL 7177 F NAME SMITH, CURTIS D 357 GOLDSTONE CT STREET ADDRESS **DO NOT WRITE** CITY-ST-ZIP LAKE MARY, FL 32746 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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 cath, 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 or branged, or on an attachment with an address, with all other five empowered.

SIGNATURE:

TIFLE NAME STREET ADDRESS CATY-ST-ZIP TETE NAME STREET ADDRESS CITY-ST-ZIP

TiNA Marie Brice 2/2/07

**FILED**