

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # K39329

1. Entity Name
SIMMONS MOVING AND STORAGE OF PENSACOLA, INC.



Principal Place of Business

% REX MCDONALD
3724 NAVY BLVD
PENSACOLA, FL 32507

Mailing Address

% REX MCDONALD
3724 NAVY BLVD
PENSACOLA, FL 32507

DO NOT WRITE IN THIS SPACE



02222007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-2915803

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCDONALD, REX
3724 NAVY BLVD
PENSACOLA, FL 32507

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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

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 Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MCDONALD, REX
STREET ADDRESS	3724 NAVY BLVD
CITY-ST-ZIP	PENSACOLA, FL
TITLE	D
NAME	SANDERS, GLYN
STREET ADDRESS	3724 NAVY BLVD.
CITY-ST-ZIP	PENSACOLA, FL
TITLE	TD
NAME	SIMMONS, JIM
STREET ADDRESS	4612 ANNA SIMPSON RD
CITY-ST-ZIP	MILTON, FL
TITLE	SD
NAME	MCDONALD, FAY M.
STREET ADDRESS	11569 HWY 87
CITY-ST-ZIP	MILTON, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: *Rex McDonald* **REX MCDONALD** **PRESIDENT** **APRIL-19-2007** **850-456-5470**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #