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

## Jan 18, 2007 8:00 am Secretary of State DOCUMENT # K43888 01-18-2007 90138 005 \*\*\*150.00 FEDERAL WAREHOUSE CORPORATION #1 **հ**ՍՍՍJUV∾ Principal Place of Business Mailing Address 2300 SOUTH DOCK ST. 2300 SOUTH DOCK ST. PALMETTO, FL 34221 PALMETTO, FL 34221 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 65-0088793 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RIGGS, STANLEY S JR Street Address (P.O. Box Number is Not Acceptable) 1201 TALLEVAST RD SARASOTA, FL 34243 2300 SOUTH DOCK ST. Zip Code 34221 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 Stanley 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE ☐ Change Addition RIGGS, STANLEY A JR NAME NAME 2300 SOUTH DOCK ST. STREET ADDRESS STREET ADDRESS CITY - ST - ZIP PALMETTO, FL 34221 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change

FILED

Addition

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 i1 if charged, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME

Stanley A Riggs the 1-12-07 941-729-1010

OF SIGNING OFFICER OR DIRECTOR

Date

NAME

STREET ADDRESS

CITY-ST-7IP