## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K54396

Name:

Address:

City-St-Zip:

DENMARK, JILLIAN E

1948 SE PORT ST LUCIE BLVD

PORT ST LUCIE, FL 34952

Entity Name: PROFIT DEVELOPERS INC

FILED Jan 03, 2007 Secretary of State

Littly Nai	ile. FROITI	DEVELOPERS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	PORT ST LUC LUCIE, FL 34				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	PORT ST LUC LUCIE, FL 34				
FEI Number:	65-0095230	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
1948 SE P SUITE 2-D PT ST LUC The above	OIE, FL 34952 named entity e of Florida.	IE BLVD. US	purpose of changing its registered	d office or registered agent, or both,	
	Electron	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SCHOONMAKE	ST. LUCI BLVD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SCHOONMAKE 1948 SE PORT	) Delete ER, KATHERINE ST. LUCIE BLVD. UCIE, FL 34952	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	T (	) Delete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: KATHERINE SCHOONMAKER VP 01/03/2007