2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Aug 20, 2007 8:00 am Secretary of State **DOCUMENT # L97363** 1. Entity Name 08-20-2007 90054 016 ***150.00 YONTZ CORPORATION Principal Place of Business Mailing Address 16470 HWY 27 16470 HWY 27 40140000 LAKE WALES, FL 33859 LAKE WALES, FL 33859 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08142007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3032652 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YONTZ, DONALD W Street Address (P.O. Box Number is Not Acceptable) 143 SUNWARD RUN DAVENPORT, FL 33896 City Zip Code 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 printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be П Trust Fund Contribution. Due by September 14, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Addition Delete TITLE TITLE YONTZ, DONALD W. NAME NAME 143 SUNWARD RUN DAYENPORT, FL 33896 STREET ADDRESS 1007 BAYHILL DR SE STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL CITY-ST-ZIP tm s STD Delete TITLE NAME BONELL, DONNA NAME 16470 HWY 275 16470 HWY 27 STREET ADORESS STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33853 CITY-ST-ZIP Delete TITLE GLUECHERT, RICHARD F NAME NAME 4875 WESTFALIA CT STREET ADDRESS STREET ADORESS CITY-ST-ZIP ATLANTA, GA 30342 CITY-SI-ZIP VPD Delete ☐ Change ☐ Addition TILLE TITLE YONTZ, BONNIE BURNS 143 SUNWARD RUN STREET ADDRESS STREET ADDRESS DAVENPORT, FL 33896 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE me Delete Change ☐ Addition NAME NAME STREET ADDRESS 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 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 thran address, with all other like empowered. changed, or on an attachment with

FILED

ATTACHMENT 40129585

YONTZ CORPORATION
16470 HWY 27
LAKE WALES, FL 33859
PHONE/FAX 863 638 4048

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

August 15, 2007

Dear Sirs,

As per telephone conversation with representative Tyrone Scott, I am sending a check for \$150. Youtz Corp. did not receive notice of renewal before May 1, 2007. Representative Scott advised me to request that late fees be waived.

Thank you for your attention in this matter.

Donna Bonell

STD Yontz Corporation