

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001579

FILED
May 23, 2007
Secretary of State

Entity Name: DARLYNN'S DARLINS, INC.

Current Principal Place of Business:

2842 ROSALIE LAKE ROAD
LAKE WALES, FL 338989309 US

New Principal Place of Business:

Current Mailing Address:

2842 ROSALIE LAKE ROAD
LAKE WALES, FL 338989309 US

New Mailing Address:

FEI Number: 59-3702104 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CZERNER, DARLYNN S
2842 ROSALIE LAKE ROAD
LAKE WALES, FL 338989309 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/TR () Delete
Name: CZERNER, DARLYNN S
Address: 2842 ROSALIE LAKE ROAD
City-St-Zip: LAKE WALES, FL 338989309

Title: VP/S () Delete
Name: MARTIN, CLINTON D
Address: 2842 ROSALIE LAKE ROAD
City-St-Zip: LAKE WALES, FL 33898

Title: DIR () Delete
Name: DEKILDER, STEPHANIE
Address: 146 LAKEVIEW DR.
City-St-Zip: HAINES CITY, FL 33844

Title: DIR () Delete
Name: KENNEDY, DEBBIE
Address: 2613 NE 28TH COURT, APT 2A
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: DIR () Delete
Name: FORLINES, JACKIE
Address: 6113 PONDEROSA ROAD
City-St-Zip: RALEIGH, NC 27612

Title: DIR () Delete
Name: CHAMBERS, JOHN
Address: P.O. BOX 26486
City-St-Zip: AUSTIN, TX 78755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DSCZERNER

P

05/23/2007

Electronic Signature of Signing Officer or Director

Date