

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003316

FILED  
Feb 16, 2007  
Secretary of State

Entity Name: FLORIDA CRACKER STYLE, INC.

## Current Principal Place of Business:

2441 VERMONT STREET  
WEST MELBOURNE, FL 32904

## New Principal Place of Business:

760 FOOTBRIDGE DR  
#204  
MELBOURNE, FL 32934

## Current Mailing Address:

2441 VERMONT STREET  
WEST MELBOURNE, FL 32904

## New Mailing Address:

760 FOOTBRIDGE DR  
#204  
MELBOURNE, FL 32934

FEI Number: 01-0612465

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEMETH, NANCY  
2441 VERMONT STREET  
WEST MELBOURNE, FL 32904 US

## Name and Address of New Registered Agent:

NEMETH, NANCY  
760 FOOTBRIDGE DR  
#204  
MELBOURNE, FL 32934 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: NANCY NEMETH

02/16/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete  
Name: NEMETH, NANCY  
Address: 2441 VERMONT STREET  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D ( ) Delete  
Name: KOHFELDT, CYNDRA  
Address: 2441 VERMONT STREET  
City-St-Zip: MELBOURNE, FL 32904

Title: D ( ) Delete  
Name: KOHFELDT, KAYLEE  
Address: 2441 VERMONT STREET  
City-St-Zip: MELBOURNE, FL 32904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition  
Name: NEMETH, NANCY  
Address: 760 FOOTBRIDGE DR, #204  
City-St-Zip: MELBOURNE, FL 32934

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 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: NANCY NEMETH

PTSD

02/16/2007

Electronic Signature of Signing Officer or Director

Date