

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004841

FILED
Jan 10, 2007
Secretary of State

Entity Name: LADY EVERBLADES, INC.

Current Principal Place of Business:

PO BOX 294
ESTERO, FL 33928

New Principal Place of Business:

13725 COLLINA COURT
ESTERO, FL 33928

Current Mailing Address:

PO BOX 294
ESTERO, FL 33928

New Mailing Address:

FEI Number: 20-0936004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLY, SUSAN
13725 COLLINA COURT
ESTERO, FL 33928 US

Name and Address of New Registered Agent:

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 () Delete
Name: NOVAK, DENISE
Address: 150 WEBER BLVD N
City-St-Zip: NAPLES, FL 34120

Title: V () Delete
Name: JACOBS, LISA
Address: 13815 WATERBURY CT
City-St-Zip: FORT MYERS, FL 33919

Title: T () Delete
Name: HOLLY, SUSAN
Address: 13725 COLLINA COURT
City-St-Zip: ESTERO, FL 33928

Title: S () Delete
Name: HEATHER, DESANTO
Address: 3347 ANTICA STREET
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: SHORT, WANDA
Address: 14840 LAKE OLIVE DRIVE
City-St-Zip: FORT MYERS, FL 33919

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: SUSAN HOLLY

T

01/10/2007

Electronic Signature of Signing Officer or Director

Date