

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005075

FILED
Apr 29, 2007
Secretary of State

Entity Name: FILLING AREA NEEDS, INC.

Current Principal Place of Business:

3405 65 ST E
BRADENTON, FL 34208

New Principal Place of Business:

Current Mailing Address:

3405 65 ST E
BRADENTON, FL 34208

New Mailing Address:

FEI Number: 30-0185026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISS, JANET
3405 65 ST E
BRADENTON, FL 34208 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: SEC () Delete
Name: MICHEL, DIANA
Address: 3405 65 ST E
City-St-Zip: BRADENTON, FL 34208

Title: PRES () Delete
Name: WEISS, JANET
Address: 3405 65 ST E
City-St-Zip: BRADENTON, FL 34208

Title: TREA () Delete
Name: JAIN, ANILA
Address: 3405 65 ST E
City-St-Zip: BRADENTON, FL 34208

Title: VP () Delete
Name: BILL, FOLZ
Address: 3405 65TH ST. E.
City-St-Zip: BRADENTON, FL 34208

Title: DIR () Delete
Name: BROWN, THELMA
Address: 3405 65TH ST. E.
City-St-Zip: BRADENTON, FL 34208

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:

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: ANILA JAIN

TREA

04/29/2007

Electronic Signature of Signing Officer or Director

Date