2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2007
Secretary of State

DOCUMENT# N04821

Entity Name: CEDARS OF LEBANON ENTERPRISES, INC.

Current Principal Place of Business:

2812 NORTH 27TH STREET
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4787
TAMPA, FL 336774787

New Mailing Address:

701 S. HOWARD AVENUE
SUITE 106-354
TAMPA, FL 33606

FEI Number: 59-2511463 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ENGLAND, ALTHEA S PRES
2812 N. 27TH STREET
TAMPA, FL 33605 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/TR	( ) Delete
Name:	ENGLAND, ALTHEA S MS.	
Address:	2812 N. 27TH STREET	
City-St-Zip:	TAMPA, FL 33605	
Title:	V/TR	( ) Delete
Name:	DALLAS, RUDOLPH MR.	
Address:	2812 N. 27TH STREET	
City-St-Zip:	TAMPA, FL 33605	
Title:	S/TR	( ) Delete
Name:	RUSSELL, MARILYN D MS.	
Address:	2812 N. 27TH STREET	
City-St-Zip:	TAMPA, FL 33605	
Title:	TR	( ) Delete
Name:	CERVONE, WILLIAM P ATTY	
Address:	120 WEST UNIVERSITY AVENUE	
City-St-Zip:	GAINESVILLE, FL 32602	

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:	

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: ALTHEA SMITH ENGLAND P/TR 04/21/2007

Electronic Signature of Signing Officer or Director — Date