

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003737

FILED  
May 10, 2007  
Secretary of State

Entity Name: MILES FOR MOFFITT, INC.

## Current Principal Place of Business:

505 SOUTH RIVERHILLS DRIVE  
TEMPLE TERRACE, FL 33617

## New Principal Place of Business:

## Current Mailing Address:

505 SOUTH RIVERHILLS DRIVE  
TEMPLE TERRACE, FL 33617

## New Mailing Address:

FEI Number: 06-1782588      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

DE LA PARTE, L. DAVID  
C/O DE LA PARTE & GILBERT, P.A.  
101 EAST KENNEDY BLVD., SUITE 3400  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

FAREWELL, TAMMY  
870 QUAIL RUN  
LABELLE, FL 33935 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: TAMMY FAREWELL

05/10/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition  
Name: KAREN, DALTON  
Address: 505 S RIVERHILLS DR  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: V ( ) Change (X) Addition  
Name: RICH, MCCREA  
Address: 201 E KENNEDY BLVD, STE 800  
City-St-Zip: TAMPA, FL

Title: T ( ) Change (X) Addition  
Name: TAMMY, FAREWELL  
Address: 870 QUAIL RUN  
City-St-Zip: LABELLE, FL 33935

Title: S ( ) Change (X) Addition  
Name: SARITA, CHARLTON  
Address: 16011 IVY LAKE DR  
City-St-Zip: ODESSA, FL 33556

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: TAMMY FAREWELL

T

05/10/2007

Electronic Signature of Signing Officer or Director

Date