

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003825

FILED
Feb 19, 2008
Secretary of State

Entity Name: A P A C K INC.

Current Principal Place of Business:

12 SOUTH MAIN STREET
BROOKSVILLE, FL 34601 US

New Principal Place of Business:

Current Mailing Address:

7473 BONNIE LAKE ROAD
BROOKSVILLE, FL 34601 US

New Mailing Address:

FEI Number: 56-2670533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYSON, NANCY G
7473 BONNIE LAKE ROAD
BROOKSVILLE, FL 34601 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: DUVAL, JEFFREY
Address: 977 COACHLIGHT LANE
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: VP () Delete
Name: JENNINGS, JERRY
Address: 11451 PIKE AVENUE
City-St-Zip: SPRING HILL, FL 34609 US

Title: DIR () Delete
Name: GARMAN, ALAN K
Address: 23080 DEWITT DRIVE
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: DIR () Delete
Name: GARMAN, DARRYL W CAPT
Address: 6365 POST COURT
City-St-Zip: SPRING HILL, FL 34606 US

Title: DIR () Delete
Name: COBURN, CHRISTOPHER
Address: 15442 ARVIN DRIVE
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: DIR () Delete
Name: COBURN, MICHAEL DEPUTY
Address: 23314 CHRISTIAN CIRCLE
City-St-Zip: BROOKSVILLE, FL 34601 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: ALAN K, GARMAN

DIR

02/19/2008

Electronic Signature of Signing Officer or Director

Date