

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 24, 2007 8:00 am
Secretary of State

07-24-2007 90041 021 ****70.00

DOCUMENT # N08462

1. Entity Name
FANG EAGLE'S NEST, INC.



Principal Place of Business
**14300 FANG DRIVE
JACKSONVILLE, FL 32218 US**

Mailing Address
**1927 SE 148TH ST.
STARKE, FL 32091**

40120000



07152007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1100221

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**TENLY, ALLAN D
1927 SE 148TH ST.
STARKE, FL 32091**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MIXSON, JOHN H
STREET ADDRESS	3394 SHENANDOAH DRIVE EAST
CITY - ST - ZIP	ORANGE PARK, FL 32065
TITLE	ST
NAME	TENLY, ALLEN D
STREET ADDRESS	1927 SE 148 STREET
CITY - ST - ZIP	STARKE, FL 32091
TITLE	D
NAME	HARRIS, RONALD D
STREET ADDRESS	1746 MORNINGSIDE DR
CITY - ST - ZIP	MIDDLEBURG, FL 32068
TITLE	D
NAME	BATTEN, DAWN A
STREET ADDRESS	1219 CARTER ROAD
CITY - ST - ZIP	LAWTEY, FL 32058
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

18 July 07

Date

904 741 7276

Daytime Phone #