2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 21, 2007 8:00 am Secretary of State

ANNOAL ILLI OILI					Secretary of State			
1. Entity Nam	MENT # N21371 SERTOMA, INC.					90019 034 ****61.		
P.O. BOX 385 P.		Mailing Address P.O. BOX 385 PENSACOLA, FL 32591			PANTITOI			
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02182007	Chg-NP	CR2E037 (12/06)		
City & State		City & State		4. FEI Number 59-28327	786		plied For LApplicable	
Zip	Country	Zip	Country	5. Certificate of		\$8.75 Add	itional	
	6. Name and Address of Curren	t Registered Agent	1	7. Name and Ad	ddress of New F	Registered Agent		
MANCHES	STER, DIANA	Name						
316 S BAY	/ LEN ST DLA, FL 32501		Street Ad	dress (P.O. Box Number i	s Not Acceptabl	e)		
	, ,							
			City ·			FL Zip Code	3	
	named entity submits this statement lions of registered agent.	or the purpose of changing its r	egistered office or	registered agent, or both,	in the State of Fl	orida. I am familiar with,	and accept	
	Signature, typed or printed name of registered ager	nt and title if applicable (NOTE.	Registered Agent signatur	e required whoreveristating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State			
10.	OFFICERS AND D	IRECTOR\$	11. 11TLF	ADDITIONS/CHAN	GES TO OFFICE	RS AND DIRECTORS IN	10 Addition	
NAME STREET ADDRESS CITY-ST-ZIP	MANCHESTER, DIANA 316 S BAYLEN ST PENSACOLA, FL 32501	Delete		Swinn Carles 9975 Scenic H Pensacola FL	1 	Change	T AGOMON	
HULF NAME STREET ADDRESS CHY-ST-ZIP	S CARLEY, GWINN 9975 SCENIC HWY PENSACOLA, FL 32514	₩ Delete	TITLE NAME	T Diana Manch 316 S. Bayl Pensawia F	ester en St	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	T DREADEN, MARK 3015 WINDERMERE DR PENSACOLA, FL 32503	X Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP	S Illauna Br 2355 Scen Pensacola	azwell	☐ Change	Addition	
THLE NAME STREET ADDRESS CHY-ST-ZIP		. Delete	TITLE NAME STREFT ADDRESS CITY-ST-ZIP	J CM SUCO (A	<u> </u>	Change	Addition	
ITILE NAME STHEET ADDRESS CITY-ST-7IP		, · Delete	THLE NAME STREET ADDRESS CHY-SI-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST ZIP		- Delcie	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Crange	Addition	

12. Thereby certify that the information supplied with this filing does not quality 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

Manchester

2/19/07

850-444-7259

Daytitic Phone #