2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2007 8:00 am Secretary of State

1. Entity Name	MENT # N32928 ROAD MAINTENANCE AS	SOCIATION, INC.			× 04-	19-2007 90	0181 02:	3 ****61.2	!5	
Principal Place 7851 SUPPL FORT MYERS	Y DRIVE	Mailing Address 7851 SUPPLY DRIVE FORT MYERS, FL 33912	<u></u>		- 150)1501 ANG (2150 (276 11 2121 1 614	in diplo <i>e</i> thick	firmi da igui	
2. Principal Pl	lace of Business - No P.O. Box #	7 Mailing Address Alice	o Roao							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			04122007 Ch	g-NP	CR2E0	37 (12/06)		
City & State	9	Fort Myers	s Flor	ida	4. FEI Number 65-012903	9		No	plied For ot Applicable	
Zip	Country	33912	Country U.S.		5. Certificate of Sta	itus Desired		\$8.75 Add Fee Require		
	6. Name and Address of Curren	t Registered Agent	Name		7. Name and Add	ess of New R	egistered	Agent		
WILES, MARK 7851 SUPPLY DRIVE				Street Address (P.O. Box Number is Not Acceptable)						
FORT MYE	ERS, FL 33912				 					
	· · · · · · · · · · · · · · · · · · ·		City				FL			
the obligation of the street o	named entity submits this statement ions of registered agent. Signature, typed or printed name of registered age	.ks				The State of Fic	16/07	тапшаг жил,	ала ассерс	
		interior tibe in applications. (NOTE: H	egisterec Agent signat	ture required :	when reinstating)		DATE			
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Cod	aign Financing		\$5.00 May Be Added to Fees		ake chec	k payable to		
10.	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND D	Election Camp Trust Fund Cor DIRECTORS	naign Financing ntribution.		\$5.00 May Be	Flor	ake chec ida Depa	rtment of SI	tate	
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Co	aign Financing ntribution.	S/T Paul, 1600	\$5.00 May Be Added to Fees DDITIONS/CHANGE Lisa Plico Road	Flor S TO OFFICE /2-51	ake chec ida Depa	rtment of Si	tate	
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND E PD PALEN, HOWARD E. 10181 SIX MILE CYPRESS	Election Camp Trust Fund Cor DIRECTORS	naign Financing ntribution. 11. TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees DOITIONS/CHANGE Lisa AlicoRoad Myers, Fl Dlas, Bruce O Alico R	Flor 12-51 33912 pad 12-	ake chec ida Depa RS AND D	rtment of SI	tate	
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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

4/16/07

Davume Phone #