


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 01, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N99000006728</b> 1. Entity Name <b>AROUND FLORIDA USA, INC.</b>		
Principal Place of Business <b>8833 COVENTRY CT. JACKSONVILLE FL 32257</b>		Mailing Address <b>8833 COVENTRY CT. JACKSONVILLE FL 32257</b>
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.	
City & State		City & State
Zip	Country	Zip
4. FEI Number <b>59-3611479</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent  <b>STEERE, D.J. 8833 COVENTRY CT. JACKSONVILLE FL 32257</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b> Zip Code</span>
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____		



1st MOORE CR2E037 (10/06)

4. FEI Number **59-3611479** Applied For  Not Applicable  
 5. Certificate of Status Desired  **\$8.75** Additional Fee Required

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input type="checkbox"/> Delete STEERE, D.J.	TITLE	
NAME	8833 COVENTRY COURT	NAME	
STREET ADDRESS	JACKSONVILLE FL 32257	STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<b>U00000617070</b>
			<b>02/07/07-80060-016 61.25</b>
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 address, with all other like empowered

**SIGNATURE:** D.J. Steere, Director January 29, 2007 904-733-9150