


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 A
Secretary of State

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|---|---|
| DOCUMENT # P00000042567 1. Entity Name BALLARD AIR FRESHENERS, INC. |  |
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| Principal Place of Business 114 AVALON DR ORMOND BEACH, FL 32176 | Mailing Address 114 AVALON DR ORMOND BEACH, FL 32176 |
|--|--|

DO NOT WRITE IN THIS SPACE



04132007 No Chg-P CR2E034 (11/05)

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|------------------------------------|--|
| 4. FEI Number 59-3652287 | Applied For <input type="checkbox"/> Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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6. Name and Address of Current Registered Agent

**BALLARD, JERRY L
114 AVALON DR.
ORMOND BEACH, FL 32176**

**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 *Jerry L Ballard* DATE 4-13-07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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10. OFFICERS AND DIRECTORS

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|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PDT BALLARD, JERRY L 114 AVALON DR ORMOND BEACH, FL 32176 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VDS BALLARD, CHERI L 114 AVALON DR ORMOND BEACH, FL 32176 |
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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 607, 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: *Jerry L Ballard* Date 4-13-07 Daytime Phone # 386 441-2425

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR