

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045259

FILED
Feb 17, 2007
Secretary of State

Entity Name: FORDYCE INVESTMENTS INC.

Current Principal Place of Business:

7900 LOXLEY AVE
N. PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

7900 LOXLEY AVE
N. PORT, FL 34286

New Mailing Address:

FEI Number: 59-3644732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORDYCE, RANDALL
7900 LOXLEY AVE
N. PORT, FL 34286 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FORDYCE, RANDALL
Address: 7900 LOXLEY AVE
City-St-Zip: N. PORT, FL 34286

Title: D () Delete
Name: FORDYCE, KIMBERLY
Address: 7900 LOXLEY AVE
City-St-Zip: N. PORT, FL 34286

Title: D () Delete
Name: FORDYCE, COURTNEY
Address: 7900 LOXLEY AVE
City-St-Zip: N. PORT, FL 34286

Title: D () Delete
Name: FORDYCE, CASSIE
Address: 7900 LOXLEY AVE
City-St-Zip: N. PORT, FL 34286

Title: D () Delete
Name: FORDYCE, CASEY
Address: 7900 LOXLEY AVE
City-St-Zip: N. PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDALL FORDYCE

PRES

02/17/2007

Electronic Signature of Signing Officer or Director

_____ Date