FILED Apr 23, 2008 8:00 am Secretary of State 02-06-2008 90037 002 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000073242 1. Entity Name SINGLETON AND SONS, INC.				
411 PUTNAM COUNTY BLVD.	NAM COUNTY BLVD. 680 OLD SAN MATEO ROAD			
			01212008 No Chg-P CR26	
DO NOT WRITE I	N.THIS.SPA	SE.	4. FEI Number 59-3661778 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional Fee Required
8. Name and Address of Current Registration, JAMES C 411 PUTNAM COUNTY BLVD. EAST PALATKA, FL 32131	stered Agent		DO NOT WRIT	
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: However agent and the above 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: However agent and the above the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: However agent and the above the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				
FILE NOW!!!. FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 S. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10. OFFICERS AND DIRE	CTORS			
NAME SINGLETON, JAMES C STREET ADDRESS ROUTE 1, BOX 330				1 m 1 m
ST-2P EAST PALATKA, FL 32131 D SINGLETON, MARY S ET ADDRESS ROUTE 1, BOX 330 -ST-2P EAST PALATKA, FL 32131				
TITLE D NAME SINGLETON, STEPHEN J STREET ADDRESS OTY-ST-EP SAN MATEO, FL 32167	SINGLETON, STEPHEN J P.O. BOX 1365		DO NOT WRIT	E
TITLE MANUE STREET ADDRESS CTY-ST-ZIP	SS		IN THIS SPACE	
TITLE MANGE STREET ADDRESS CITY-ST-77P ,1	•			
TITLE NAME STREET ADDRESS CMY-ST-ZP	-			
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliernulal 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: JOHN TYPES OF PRINTE	O NAME OF SIGNETIC OF FIGER OF DIRECT	ton -	2/29/08 Date	Овунте Раже #