2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000113087

FILED
Jan 31, 2008 08:00 A
Secretary of State

1. Entity Name MISS DAISY'S INC.			; ;	
Principal Place of Business	Mailing Address]	
17054 COLONY LAKES BLVD FT MYERS, FL 33908	17054 COLONY LAKES BLVD FT MYERS, FL 33908			
DO NOT WE	TE 111 THO ODA	0 5	01222008	No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		CE	4. FEI Number Applied For 65-1060806 Not Applicable	
	•		5. Certificate	of Status Desired
6. Name and Address of Co	rrent Registered Agent			
SIMMONS, COLLEEN K 16520 WELLINGTON LAKES CIR FT MYERS, FL 33908		DO NOT WRITE IN THIS SPACE		
The above named entity submits this stated the obligations of registered agent. SIGNATURE	nent for the purpose of changing its register	ed office or register	red agent, or bo	th, in the State of Florida. I am familiar with, and accept
Signature, typed or printed name of registers	d agent and title if applicable (NOTE, Registers	ed Agent signature required	d when reuns(alling)	DATE
			.00 May Be led to Fees	000000806860 02/06/08-80058-011 150.00
	S AND DIRECTORS	T .	<u>. </u>	
TITLE D NAME SIMMONS, COLLEEN K		1		
NAME SIMMONS, COLLEEN K STREET ADDRESS 17054 COLONY LAKES BL	VD	1	•	

DO NOT WRITE IN THIS SPACE

12. I hereby 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 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:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS City-St-Zip

NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS FT MYERS, FL 33908

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-08

239 482 5/46 Daving Phone #