

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003669

FILED
Jan 04, 2007
Secretary of State

Entity Name: PIE IN THE SKY, INCORPORATED

Current Principal Place of Business:

107 W. FIRST ST
SUITE 100
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1672
SANFORD, FL 32772 US

New Mailing Address:

FEI Number: 59-3687851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRANIAS, THEODORE M
P.O. BOX 1672
SANFORD, FL 32772 US

Name and Address of New Registered Agent:

CRANIAS, THEODORE M
107 WEST 1ST STREET
SUITE 100
SANFORD, FL 32771 US

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:

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: CRANIAS, THEODORE M
Address: 1503 SUNSHINE TREE BLVD
City-St-Zip: LONGWOOD, FL 32779 US

Title: VS () Delete
Name: CRANIAS, VAN J
Address: 54 NARANJA RD
City-St-Zip: DEBARY, FL 32713 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: THEODORE M. CRANIAS

PT

01/04/2007

Electronic Signature of Signing Officer or Director

Date