2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2008 08:00 A Secretary of State

ANNUAL REPORT				Mar 10, 2000 00:	
DOCU	MENT # P010000268	889			Secretary of St
Entity Name CHARLES MORRIS, JR. FERNERY, INC.					••
es Santa	•				
- Principal Plac	ce of Business	Mailing Address		1	
	HICHURCH ROAD CITY, FL. 32112	216 BEULAH CHURCH ROAD CRESCENT CITY, FL 32112		-	
CINESCENT C	111,1L 32112	GRESCENT GITT, TE SZTTZ			
				-	
				02272008	No Chg-P CR2E034 (11/05)
	O NOT WRITE	IN THIS SPA	CE	02272008	
				4. FEI Numb 29-371	8960 Not Applicable
		And the second second		5. Certificate	of Status Desired
. j ke	6. Name and Address of Current Re	gistered Agent	,		
	EDWARD S			DO	NOT WRITE
	AH CH ROAD NT CITY, FL 32112		٠.		THIS SPACE
				114	' AGE
8. The above	e named entity submits this statement for t	ne purpose of changing its register	ed office or register	red agent, or bo	oth, in the State of Florida. I am familiar with, and accept
(he obliga	tions of registered agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable (NOTE Registere	ed Agent signature required	I when reinstating)	DATE
	C 11011011 CDT 10 \$150.00	9. Election Campaign Final	neino \$5	.00 May Be	-
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	والقرامة مراحا		ed to Fees	
10.	OFFICERS AND DI	RECTORS	-		
TITLE NAME	P MORRIS, EDWARD S				U00000852363 03/26/08-80026-010 150.00
STREET ADDRESS CITY-ST-ZIP	210 BEULAH CHURCH RD CRESCENT CITY, FL 32112				03/26/08-80026-010 150.00
TITLE					
NAME STREET ADDRESS					
CIJY-ST-ZIP			-		· ·
TITLE NAMÉ					
STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE			1	IN '	THIS SPACE
NAME STREET ADDRESS				11 V	THE OF AGE
CITY-ST-ZIP					
TITLE NAME					,
STREET ADDRESS CITY-ST-ZIP					
TITLE.		A MARKA MAR — S - Million — Marka Mar — S - Million — Marka Mark — Marka Marka Marka — Marka Marka Marka Marka — Marka Marka Marka Marka — Marka Marka Marka — Marka Mark			
NAME STREET ADDRESS					
CITY-ST-ZIP					

12. Thereby 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: Elward S. Maris	3-5-08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daylime I	