

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087709

FILED
Aug 14, 2007
Secretary of State

Entity Name: FRANCIS I ESTATES SALES, INC.

Current Principal Place of Business:

29 MIMI ST
SEBRING, FL 33875

New Principal Place of Business:

Current Mailing Address:

29 MIMI ST
SEBRING, FL 33875 US

New Mailing Address:

FEI Number: 59-3746529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, SCOTT E ESQUIRE
240 S. PINEAPPLE AVE - 10TH FLOOR
SARASOTA, FL 34236 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEELER, RICHARD
Address: 723 STEPHEN DR
City-St-Zip: SEBRING, FL 33875

Title: SD () Delete
Name: CROUCH, DONALD
Address: 455 SUNRISE BLVD
City-St-Zip: SEBRING, FL 33875

Title: VP () Delete
Name: HOFFORTH, BERNARD
Address: 336 TIGERTAIL RD
City-St-Zip: SEBRING, FL 33875

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOFFARTH, BERNARD
Address: 336 TIGERTAIL ROAD
City-St-Zip: SEBRING, FL 33875

Title: V (X) Change () Addition
Name: CUMMINGS, ROBERT
Address: 7
City-St-Zip: CHEROKEE ST, FL 33875

Title: T (X) Change () Addition
Name: ROBERTS, SUSAN
Address: 602 SEBRING DRIVE
City-St-Zip: SEBRING, FL 33875

Title: S () Change (X) Addition
Name: CRAWLEY, MICKEY
Address: 18 CHEROKEE STREET
City-St-Zip: SEBRING, FL 33875

Title: D () Change (X) Addition
Name: KELLER, PATRICIA
Address: 551 ADDISON STREET
City-St-Zip: SEBRING, FL 33875

Title: D () Change (X) Addition
Name: WHITEHEAD, JULIETTE
Address: 509 VON MAXCY ROAD
City-St-Zip: SEBRING, FL 33875

I hereby certify that the information supplied with this filing does not qualify 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: BERNARD HOFFARTH

P

08/14/2007

Electronic Signature of Signing Officer or Director

Date