## **2007 FOR PROFIT CORPORATION**

**ANNUAL REPORT** 

DOCUMENT # P02000000599 AMERACO, INC.



**FILED** May 11, 2007 08:00 AM Secretary of State

Principal Place of Business

4638 SE 15TH AVE CAPE CORAL, FL 33904 Mailing Address

4638 SE 15TH AVE CAPE CORAL, FL 33904



DO NOT WRITE IN THIS SPACE

05082007 CR2E034 (11/05) No Chg-P Applied For

30-0004996 5. Certificate of Status Desired

4. FEI Number

Not Applicable \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A. 1840 SW 22 ST., 4TH FL MIAMI, FL 33145

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the ions of registered agent.	purpose of changing its registered	d office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and titl	e if applicable (NOTE: Registered	Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financ Trust Fund Contribution.	sing \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10, TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE DP FINDLEY, DOUGLAS A 3833 SE 7TH AVE CAPE CORAL, FL 33904	CTORS		000000763559 05/30/07-80015-011 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TAYLOR, CARL E 4720 SE 15TH AVE SUITE 201 CAPE CORAL, FL 33904			
TIILE Name Street address City-St-Zip	ST APRIL, MARAI RODMYER 3830 LAKE STREET FORT MYERS, FL 33901		DO	NOT WRITE
IITLE VAME Street Address City-St-Zip			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	. ,			

12. I hereby 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:

239-5*41-*17