## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

## Feb 01, 2007 08:00 AM DOCUMENT # P02000032811 **Secretary of State** 1. Entity Name DANMAR PRODUCTIONS, INC. Principal Place of Business Mailing Address P. O. BOX 21492 12247-69TH TERR. SEMINOLE, FL 33772 ST. PETERSBURG, FL 33742 No Chg-P CR2E034 (11/05) 01252007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0412136 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPIKES, MARY D DO NOT WRITE 12247-69TH TERR. SEMINOLE, FL 33772 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, types or priviled name of registered agent and time if applicable (NOTE. Registered Agent signature required when reinstaling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE SPIKES, MARY D NAME STREET ADDRESS P. O. BOX 21492 CITY-ST-ZIP ST. PETERSBURG, FL 33742 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not quality 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 AND TOPED OR PRINTED NAME OF STONING OFFICER OR DIRECTOR

FILED