2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000050552

1. Entity Name
ARRGH, INC.

Principal Place of Business	Mailing Address
4731 SUDBURY DRIVE ORLANDO, FL 32826	4731 SUDBURY DRIVE ORLANDO, FL 32826

DO NOT WRITE IN THIS SPACE

04292007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
27-0011082	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

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6. Name and Address of Current Registered Agent

DELEHUNT, JANINE
4731 SUDBURY DR
ORLANDO, FL 32826

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U00000753772
05/22/07-80025-011   150.00

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10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	WILKINSON, TERRI
STREET ADDRESS	4747 S WASHINGTON AVE #111
CITY-ST-ZIP	TITUSVILLE, FL 32780
TITLE	V
NAME	ZEHNER, NANCY
STREET ADDRESS	608 HERMITS TRAIL
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32701
TITLE	ST
NAME	DELEHUNT, JANINE
STREET ADDRESS	4731 SUDBURY DR
CITY-ST-ZIP	ORLANDO, FL 32826
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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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: _Janine S Delehunt, Treasurer_   4·28·07   407 382 2160
                SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #