

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096907

FILED  
Jan 10, 2007  
Secretary of State

Entity Name: RAISE AND RESTORE, INC.

**Current Principal Place of Business:**

2946 SCOTT CIRCLE E  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

2946 SCOTT CIRCLE E  
JACKSONVILLE, FL 32223

**New Mailing Address:**

FEI Number: 05-0532096      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAMPLES, JOSEPH  
2946 SCOTT CIRCLE E  
JACKSONVILLE, FL 32223      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: SAMPLES, JOSEPH  
Address: 2946 SCOTT CIRCLE E  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP ( ) Delete  
Name: SAMPLES, MAURICE JR  
Address: 2032 SPRING MEADOWS CT.  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VP ( ) Delete  
Name: CARLTON, MATTHEW E  
Address: 19772 NW 37TH AVENUE  
City-St-Zip: STARKE, FL 32091

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH SAMPLES

PT

01/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date