2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# P02000110413

Entity Name: MONTPETIT ENTERPRISES, INC.

Current Principal Place of Business:

20 SOUTH LAKE AVE
LAKE BUTLER, FL 32054 US

New Principal Place of Business:

365 NW 3RD STREET
LAKE BUTLER, FL 32054 US

Current Mailing Address:

365 NW 3RD STREET
LAKE BUTLER, FL 32054 US

New Mailing Address:

FEI Number: 06-1651886 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONTPETIT, JOHN R PD
365 NW 3RD STREET
LAKE BUTLER, FL 32054 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: PD ( ) Delete
Name: MONTPETIT, JOHN R PD
Address: 365 NW 3RD STREET
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: SVPD ( ) Delete
Name: HALL, BILLY SVPD
Address: 11609 NE SR 121
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: VPD ( ) Delete
Name: MONTPETIT, II, JOSEPH D VPD
Address: 1770 SE CR 252
City-St-Zip: LAKE CITY, FL 32025 US

Title: SD ( ) Delete
Name: GAUBATZ, ROBERT E SD
Address: 9281 SW 109TH RUN
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: TD ( ) Delete
Name: WILSON, ROBIN P TD
Address: 5598 SW CR 18A
City-St-Zip: LAKE BUTLER, FL 32054 US

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:

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: JOHN R MONTPETIT PD 04/24/2007

Electronic Signature of Signing Officer or Director Date