2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 18, 2008 8:00 am Secretary of State

| DOCUMENT # P02000135019 I. Entity Name MS REEDER, INC. | | | 03-18-2008 90020 043 ***150.00 | |
|--|--|---|---|---|
| Principal Place of Business 4308 STONEBRIDGE ROAD DESTIN, FL 32541 | Mailing Address 4308 STONEBRIDGE ROAD DESTIN, FL 32541 |) | | |
| 2. Principal Place of Business - No P.O. Box # 4125 Gulf of Mexico Drive | 3. Mailing Address 4125 Gulf of Me | xico Drive | | |
| Suite, Apt. #, etc. Unit 301 | Suite, Apt. #, etc. Unit 301 | KICU DIIVO | 02042008 Chg-P CR2I | E034 (12/06) |
| City & State Long boat Key, FL | City & State Langboat Key, | FL | 4. FEI Number 90-0057847 | Applied For Not Applicable |
| 2ip Country 34228 Country 6. Name and Address of Current | 34228 | Country | Certificate of Status Desired Name and Address of New Registerer | \$8.75 Additional Fee Required |
| REEDER, MICHAEL S 4308 STONEBRIDGE ROAD DESTIN, FL 32541 Name Reed Street Address (4125) Unit | | | ler Michael S (P.O. Box Number is Not Acceptable) Gult of Mexico Drive 301 boat Key F | |
| 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 MICHAEL S REEDER MUDICAL STATES A CHOICE Registered Agent are styrially a required when re-ristating) DATE | | | | |
| FILE NOWIN FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees | | | | |
| 10. OFFICERS AND | DIRECTORS Delete | 11. mle P | ADDITIONS/CHANGES TO OFFICERS AN | ND DIRECTORS IN 11 X Change ☐ Addition |
| NAME REEDER, MICHAEL S STREET ADDRESS 4308 STONEBRIDGE ROAD CITY-ST-ZIP DESTIN, FL 32541 | | NAME Ree STREET ADDRESS 412 | der, Michael S. 5 Gulf of Mexico Drive 19 boat Key, FL 34228 | "Unit 301 |
| ITTLE S NAME REEDER, CHRISTINA STREET ADDRESS 4308 STONEBRIDGE ROAD DESTIN, FL 32541 | ☐ Delete | STACE ADDRESS 41/2 | der, Christina 5 Gulf of Mexico Drive about Key, FL 34228 | ⊠Change □ Addition Unit 301 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Delete | TITLE NAME STREET ADDRESS CITY-SI-ZIP | <u> </u> | Change Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | □ Detate | TITLE NAME STREET ADDRESS CITY-S1-ZIP | | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C.) Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Change ☐ Addition |
| 12. I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee empty changed, or on an attachment with an address. | s true and accurate and that my si | gnature shall have the equired by Chapter 60 | same legal effect as if made under oath; that | I am an officer or director |