## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000135224

City-St-Zip:

GENEVA, FL 32732 US

Entity Name: OCALA SEWING CENTER, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
16850 S. US HIGHWAY 441, SUITE 304 SUMMERFIELD, FL 34491				16910 S. US HIGHWAY 441, SUITE 201 SUMMERFIELD, FL 34491		
Current Mailing Address:				New Mailing Address:		
16850 S. US HIGHWAY 441 SUITE 304 SUMMERFIELD, FL 34491				16910 S. US HIGHWAY 441 SUITE 201 SUMMERFIELD, FL 34491		
FEI Number:	83-0345156	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
DOYAL, SHELLEY A 16850 S. US HIGHWAY 441 SUITE 304 SUMMERFIELD, FL 34491 US				DOYAL, SHELLEY A 16910 S. US HIGHWAY 441 SUITE 201 SUMMERFIELD, FL 34491 US		
	named entity see of Florida.	submits this statement for the p	ourpose o	f changing its register	ed office or registered agent, or both,	
SIGNATURE:				05/01/2007		
Electronic Signature of Registered Agent				Date		
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution (  ).	t receive t	he prior notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) DOYAL, SHELL PO BOX 487 GENEVA, FL 3			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( ) DOYAL, BENJA PO BOX 487 GENEVA, FL 3			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	ST () DOYAL, SHELL PO BOX 487	Delete EY A		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: BENJAMIN G. DOYAL V 05/01/2007