


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 01, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000010199</b> 1. Entity Name COLEMAN'S OF STARKE, INC.	
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Principal Place of Business 14699 S HWY 301 STARKE, FL 32091	Mailing Address 19370 NW 37TH AVE STARKE, FL 32091
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**DO NOT WRITE IN THIS SPACE**

02272008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2345179	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

COLEMAN, HILTON C JR  
14699 S HWY 301  
STARKE, FL 32091

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

Signature: typed or printed name of registered agent and title if applicable. DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLEMAN, HILTON C JR 14699 S HWY 301 STARKE, FL 32091
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLEMAN, DEANNA M 14699 S HWY 301 STARKE, FL 32091
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000000939501  
05/28/08-80030-012 150.00

**DO NOT WRITE IN THIS SPACE**

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:** Hilton Coleman Jr. Hilton Coleman Jr April 27<sup>th</sup> 904-964-2801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #