

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90298 001 ***300.00

DOCUMENT # P03000012831

1. Entity Name
NORTH ORLANDO SHIPPING, INC.



Principal Place of Business
**7200 LAKE ELLENOR DRIVE
SUITE 142
ORLANDO, FL 32809**

Mailing Address
**7200 LAKE ELLENOR DRIVE
SUITE 142
ORLANDO, FL 32809**

66006664



2. Principal Place of Business - No P.O. Box #
153 Parliament Loop

3. Mailing Address
153 Parliament Loop

Suite, Apt. #, etc.
Suite 1001

Suite, Apt. #, etc.
Suite 1001

City & State
Lake Mary, FL

City & State
Lake Mary, FL

Zip
32746

Country
USA

Zip
32746

Country
USA

03152007 Chg-P CR2E034 (12/06)

4. FEI Number
05-0553714

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
FOURMAN, CARY R
7200 LAKE ELLENOR DRIVE, SUITE 142
ORLANDO, FL 32809** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
WILSON, SCOTT H
7200 LAKE ELLENOR DRIVE, SUITE 142
ORLANDO, FL 32809** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SPRAGUE, ERIKA L
7200 LAKE ELLENOR DRIVE
ORLANDO, FL 32809** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
FOURMAN, CARY
153 Parliament Loop, Suite 1001
Lake Mary, FL 32746** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILSON, S.
153 Parliament Loop, Suite 1001
Lake Mary, FL 32746** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Sprague, Erika
153 Parliament Loop, Suite 1001
Lake Mary, FL 32746** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Scott Wilson

SCOTT WILSON

3/17/07

4075850528

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #