


FILED
May 16, 2007 8:00 am
Secretary of State

04-26-2007 90200 037 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

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DOCUMENT # P03000026675 1. Entity Name FAIRPRICE INDUSTRIES, INC.		
Principal Place of Business 1271 N. ELGIN PKWY. SHALIMAR, FL 32579		Mailing Address 1271 N. ELGIN PKWY. SHALIMAR, FL 32579
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent GATES, HARRY W 1271 N. ELGIN PKWY. SHALIMAR, FL 32579		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GATES, HARRY W 1271 N. ELGIN PKWY. SHALIMAR, FL 32579	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GATES, BARBARA 1271 N. ELGIN PKWY. SHALIMAR, FL 32579	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GATES, DONALD 33 MARILYN AVE FORT WALTON BEACH, FL 32548	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GATES, DAVID K 503 MANCHESTER FORT WALTON BEACH, FL 32547	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <u><i>Harry W. Gates</i></u> <u><i>Harry W. Gates</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>5-14-07</u> <u>850-651-1136</u> <small>Date Daytime Phone #</small>

66015129



04132007 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0681320	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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IN THIS SPACE**

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