

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000032096

FILED
Apr 26, 2007
Secretary of State

Entity Name: DEEP ROOTS CORPORATION

Current Principal Place of Business:

14545 JAMAICA DOGWOOD DR
ORLANDO, FL 32828

New Principal Place of Business:

1140 DOT DRIVE
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

14545 JAMAICA DOGWOOD DR
ORLANDO, FL 32828

New Mailing Address:

1140 DOT DRIVE
ALTAMONTE SPRINGS, FL 32714

FEI Number: 13-4244916

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, CLARISSA M
14545 JAMAICA DOGWOOD DR
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

ANDERSON, CLARISSA M
1140 DOT DRIVE
ALTAMONTE SPRINGS, FL 32714 US

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.

SIGNATURE: CLARISSA MARIE ANDERSON

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ANDERSON, CLARISSA M
Address: 14545 JAMAICA DOGWOOD DR
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ANDERSON, CLARISSA M
Address: 1140 DOT DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

SIGNATURE: CM ANDERSON

PRES

04/26/2007

Electronic Signature of Signing Officer or Director

Date