

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000080255
1. Entity Name
SHERRY DANCZYK, INC.



Principal Place of Business
**21115 BRAVEHEART DRIVE
LEESBURG, FL 34748**

Mailing Address
**21115 BRAVEHEART DRIVE
LEESBURG, FL 34748**



01032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0129798

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DANCZYK, SHERRY
21115 BRAVEHEART DRIVE
LEESBURG, FL 34748**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	P
NAME	DANCZYK, SHERRY
STREET ADDRESS	21115 BRAVEHEART DRIVE
CITY - ST - ZIP	LEESBURG, FL 34748
TITLE	VP
NAME	DANCZYK, HERBERT
STREET ADDRESS	21115 BRAVEHEART DRIVE
CITY - ST - ZIP	LEESBURG, FL 34748
TITLE	D
NAME	DANCZYK, SHERRY
STREET ADDRESS	21115 BRAVEHEART DRIVE
CITY - ST - ZIP	LEESBURG, FL 34748
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/16/07-80031-001 150.00

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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: Sherry Danczyk 1/16/07 352-728-3048
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #