2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008
Secretary of State

DOCUMENT# P03000088772

Entity Name: ABOVE PAR, INC.

Current Principal Place of Business:

225 REID AVENUE
PORT SAINT JOE, FL 32456 US

New Principal Place of Business:

222 REID AVENUE
PORT SAINT JOE, FL 32456 US

Current Mailing Address:

P.O. BOX 622
PORT SAINT JOE, FL 32457 US

New Mailing Address:

FEI Number: 37-1473214 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRAWICK, PELHAM C JR
1839 SWEET BAY RD
CHIPLEY, FL 32428 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TRAWICK, P. CARLOS JR
Address: 1839 SWEET BAY RD
City-St-Zip: CHIPLEY, FL 32428

Title: V ( ) Delete
Name: PUJOL, BARRETT V
Address: 4302 SIERRA WOODS LANE
City-St-Zip: TALLAHASSEE, FL 32311

Title: V ( ) Delete
Name: TRAWICK, LUKE N
Address: 131 BRIDGEPORT LANE
City-St-Zip: PORT SAINT JOE, FL 32456

Title: ST ( ) Delete
Name: TRAWICK WRIGHT, MICHELE
Address: 131 BRIDGEPORT LANE
City-St-Zip: PORT SAINT JOE, FL 32456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHELE T WRIGHT ST 03/10/2008
Electronic Signature of Signing Officer or Director Date