

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091149

FILED  
May 08, 2007  
Secretary of State

**Entity Name:** 1ST IMPRESSION PROPERTY MANAGEMENT AND DEVELOPMENT INC.

**Current Principal Place of Business:**

P.O. BOX 4872  
PLANT CITY, FL 33563

**New Principal Place of Business:**

1006 W TERRACE DRIVE  
PLANT CITY, FL 33563

**Current Mailing Address:**

P.O. BOX 4872  
PLANT CITY, FL 33563

**New Mailing Address:**

**FEI Number:** 30-0204306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WITT, BILLY  
3002 CHITTY ROAD  
PLANT CITY, FL 33563 US

**Name and Address of New Registered Agent:**

WITT, BILLY  
1006 W TERRACE DRIVE  
PLANT CITY, FL 33563 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: BILLY H WITT

05/08/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WITT, BILLY  
Address: P.O. BOX 4872  
City-St-Zip: PLANT CITY, FL 33563

Title: VP ( ) Delete  
Name: WITT, KIMBERLY  
Address: P.O. BOX 4872  
City-St-Zip: PLANT CITY, FL 33563

Title: SEC ( ) Delete  
Name: KEY, DELORS  
Address: P.O. BOX 4872  
City-St-Zip: PLANT CITY, FL 33564

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SEC (X) Change ( ) Addition  
Name: KEY, DELORS  
Address: P.O. BOX 4872  
City-St-Zip: PLANT CITY, FL 33563

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: BILLY H WITT

PRES

05/08/2007

Electronic Signature of Signing Officer or Director

Date