2008 FOR PROFIT CORPORATION ANNUAL REPORT

May 19, 2008 8:00 am Secretary of State DOCUMENT # P03000093237 05-19-2008 90033 038 ***150.00 1. Entity Name FELKER, INC. Mailing Address Principal Place of Business 1019 MANOR DR. 1019 MANOR DR. PALM SPRINGS, FL 33461 PALM SPRINGS, FL 33461 CR2E034 (11/05) 03182008 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FELKER, DEBORAH DO NOT WRITE 1019 MANOR DR. PALM SPRINGS, FL, 33461 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 me of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWING FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees TITLE NAME FELKER, DEBORAH 1019 MANOR DR. STREET ADDRESS PALM SPRINGS, FL 33461 CITY-ST-ZIP HAMILAND, ROLAND NAME STREET ADDRESS 1019 MANOR DR CITY-ST-ZIP LAKE WORTH, FL 33461 TITI F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITI F 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

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SIGNATURE

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