

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000095375

1. Entity Name

PETRIE VENTURES OF APOPKA, INC.



Principal Place of Business

170 E. MAGNOLIA
APOPKA, FL 32703

Mailing Address

112 AVERY LAKE DR
WINTER SPRINGS, FL 32708



04082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

77-0608956

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PETRIE, COLEMAN A
112 AVERY LAKE DR
WINTER SPRINGS, FL 32708

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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,T
NAME PETRIE, ELIZABETH A
STREET ADDRESS 112 AVERY LAKE DR
CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE VS
NAME PETRIE, COLEMAN A
STREET ADDRESS 112 AVERY LAKE DR
CITY-ST-ZIP WINTER SPRINGS, FL 32708

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05/04/07-80062-012 150.00

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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: Elizabeth Alison Petrie ELIZABETH ALISON PETRIE 4/17/07 321-277-7128

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #