

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000113764

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: SIMONE PROPERTIES, INC.

## Current Principal Place of Business:

209 N.E. 5TH AVE  
OKEECHOBEE, FL 34972

## New Principal Place of Business:

2564 SW 24TH AVENUE  
OKEECHOBEE, FL 34974

## Current Mailing Address:

209 N.E. 5TH AVE  
OKEECHOBEE, FL 34972

## New Mailing Address:

2564 SW 24TH AVENUE  
OKEECHOBEE, FL 34974

FEI Number: 55-0850065

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GRANT, NYSALA  
209 N.E. 5TH AVE  
OKEECHOBEE, FL 34972 US

## Name and Address of New Registered Agent:

GRANT, NYSOLA  
2564 SW 24TH AVENUE  
OKEECHOBEE, FL 34974 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: NYSOLA GRANT

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: GRANT, NYSOLA  
Address: 209 N.E. 5TH AVE  
City-St-Zip: OKEECHOBEE, FL 34972

Title: STD ( ) Delete  
Name: GRANT, CHANTELE  
Address: 209 N.E. 5TH AVE  
City-St-Zip: OKEECHOBEE, FL 34972

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GRANT, NYSOLA  
Address: 209 N.E. 5TH AVE  
City-St-Zip: OKEECHOBEE, FL 34972

Title: VD (X) Change ( ) Addition  
Name: GRANT, CHANTELE  
Address: 209 N.E. 5TH AVE  
City-St-Zip: OKEECHOBEE, FL 34972

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: NYSOLA GRANT

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date