

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90074 032 ***150.00

40032512



01152008 Chg-P CR2E034 (12/06)

4. FEI Number
20-0465670

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALL FLORIDA FIRM, INC
465 S VOLUSIA AVE STE C
ORANGE CITY, FL 32763

7. Name and Address of New Registered Agent

Name
ALL FLORIDA FIRM INC

Street Address (P.O. Box Number is Not Acceptable)

813 Deltona Blvd, Ste A

City
Deltona

FL

Zip Code
32725

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.

Crystal Wharton, Asst Secretary for All Florida Firm Inc
JAMIE JESSUP

SIGNATURE

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

(NOTE: Registering Agent signature required when reinstating)

DATE

FILE NOW!!! - FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
NEWKIRK, DOANLD W
2373 FLORIDA STREET
WEST PALM BEACH, FL 33406

TITLE
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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☐ Change ☐ Addition

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/08

Date

5616879367

Daytime Phone #