


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000141289	
1. Entity Name ROGER SIMMONS, INC.	

Principal Place of Business 3824 W WHIPPORWILL ST. LECANTO, FL 34461 US	Mailing Address 3824 W WHIPPORWILL ST. LECANTO, FL 34461 US
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DO NOT WRITE IN THIS SPACE



05232008 No Chg-P CR2E034 (11/05)

4. FEI Number 86-1089391	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SIMMONS, ROGER D 3824 W WHIPPORWILL ST. LECANTO, FL FL

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,T SIMMONS, ROGER D 3824 W WHIPPORWILL ST. LECANTO, FL 34461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP,S SIMMONS, DAWN A 3824 W WHIPPORWILL ST. LECANTO, FL 34461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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06/04/08-80090-014 150.00

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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: <u><i>Dawn Simmons</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>5-27-08 (352) 628-6306</u> <small>Date Daytime Phone #</small>
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