2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2008 08:00 AN Secretary of State **DOCUMENT # P0400000709** 1. Entity Name PAUL DARLING INCORPORATED Mailing Address Principal Place of Business 1630 E. DE SOTO ST. 1630 E. DE SOTO ST. PENSACOLA, FL 32501 PENSACOLA, FL 32501 US 02122008 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 34-1976498 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DARLING, PAUL A DO NOT WRITE 1630 E. DE SOTO ST. PENSACOLA, FL 32501 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 aignature required when reinstating) U00000926540 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 <u>05/20/08-80072-801 150.80</u> Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS **PRES** TITLE DARLING, PAUL A NAME STREET ADDRESS 1630 E. DE SOTO ST. PENSACOLA, FL 32501 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 five 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 tristee 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:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

4/24/08 ES

ESU-434-9497

FILED