

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020436

Entity Name: SOCO ENTERPRISES, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

20500 NW 65TH AVENUE
MCINTOSH, FL 32664

New Principal Place of Business:

Current Mailing Address:

PO BOX 298
MCINTOSH, FL 32664

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAZEMORE, J.L.
20500 NW 65TH AVE/PO BOX 298
MCINTOSH, FL 32664 US

Name and Address of New Registered Agent:

BAZEMORE, J.L.
20500 NW 65TH AVE/
MCINTOSH, FL 32664 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: J L; BAZEMORE

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BAZEMORE, WILLIAM D
Address: 20500 NW 65 TH AVE
City-St-Zip: MCINTOSH, FL 32664

Title: VP () Delete
Name: BAZEMORE, JOHN L
Address: 6550 NW 207 PLACE
City-St-Zip: MCINTOSH, FL 32664

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JL BAZEMORE

MR

04/30/2007

Electronic Signature of Signing Officer or Director

Date