

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # P04000041584

1. Entity Name
SPEAR FRANKLIN CORP.



Principal Place of Business
3721 SW 47 AVE STE 307
FT LAUDERDALE, FL 33314

Mailing Address
3721 SW 47 AVE STE 307
FT LAUDERDALE, FL 33314



01102008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1013886

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPEAR, DAVID A
3721 SW 47 AVENUE
307
FT LAUDERDALE, FL 33314

**DO NOT WRITE
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 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

000000852015
03/26/08-80011-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SPEAR, JEFFREY N
STREET ADDRESS	3721 SW 47 AVE STE 307
CITY-ST-ZIP	FT LAUDERDALE, FL 33314
TITLE	DVST
NAME	SPEAR, DAVID A
STREET ADDRESS	3721 SW 47 AVE STE 307
CITY-ST-ZIP	FT LAUDERDALE, FL 33314
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

Date

Daytime Phone #

David A. Spear David A. Spear

3/3/08

954 5819000