## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2007 08:00 AM Secretary of State

DOCUMENT # P04000053277  1. Entrity Name DIANNE GAGNON INC.			Secretary of Sta		
Principal Place 445 AZALEA DELAND, FL		Mailing Address 445 AZALEA ST DELAND, FL 32720			() ( <b>186</b> )
	OO NOT WRITE	IN TUIC COA	CE	03262007 No Chg-P CR2E034 (11/05)	
] B.	O NOT WINITE	IN THIS SEA	OE :	4. FEI Number Applied 05-0599653 Not Ap	d For plicable
				5. Certificate of Status Desired \$8.75 Addition Fee Required	al
6. Name and Address of Current Registered Agent					
GAGNON, DIANNE 445 AZALEA ST DELAND, FL 32720				DO NOT WRITE IN THIS SPACE	91
	e named entity submits this statement for the tions of registered agent.  Signature typed or printed name of registered agent and		red office or registe	ered agent, or both, in the State of Florida. I am familiar with, and	accept
FiL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.	ncing <b>\$5</b>	5.00 May Be	
10.	OFFICERS AND DI	RECTORS	4		: 17
TITLE NAME	P GAGNON, DIANNE				,
STREET ADDRESS	S 445 AZALEA ST		, , ,		
CITY-S1-ZIP	DELAND, FL 32720		· 15 / 15 / 15 / 15 / 15 / 15 / 15 / 15		14.
TITLE NAME				<u> </u>	٠,
STREET ADDRESS				04/06/07-80020-017 1	50. od
CITY-ST-ZIP					
NAME				man the state of t	
STREET ADDRESS CITY-ST-ZIP			34.	DO NOT WRITE	
TITLE	)			IN THIS SPACE	
NAME				IN THIS STACE	· '
STREET ADDRESS			1 6 2 2 2 5	The state of the s	1.

12. I nereby 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

President

3.2907

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADORESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

DIANNE GAGNON

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