

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2008 08:00 A
Secretary of State

DOCUMENT # P04000066198

1. Entity Name
EMRICK ENTERPRISES INC.



Principal Place of Business
**10276 NW 106TH STREET
FAIRFIELD, FL 32634 US**

Mailing Address
**PO BOX 628
FAIRFIELD, FL 32634--062 US**



01152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1026187

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**EMRICK, DONALD
10276 NW 106TH STREET
FAIRFIELD, FL 32634**

**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**

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	EMRICK, DAVID
STREET ADDRESS	PO BOX 628
CITY-ST-ZIP	FAIRFIELD, FL 32634-062
TITLE	VP S
NAME	EMRICK, DONALD W JR
STREET ADDRESS	207 SE 7TH AVENUE
CITY-ST-ZIP	WILLISTON, FL 32696-306
TITLE	P T
NAME	EMRICK, DONALD
STREET ADDRESS	10276 NW 106TH STREET
CITY-ST-ZIP	FAIRFIELD, FL 32634
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/24/08-80008-017 150.00

**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: Donald Emrick 1-18-08 352572-6025
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #