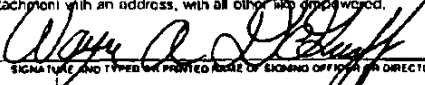


**2007 FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 14, 2007 8:00 am
Secretary of State

02-23-2007 90032 036 ***150.00

DOCUMENT # P04000101288					
1. Entity Name DEGRAAFF, INC.					
Principal Place of Business 99264 OVERSEAS HWY KEY LARGO FL 33037			Mailing Address 99264 OVERSEAS HWY KEY LARGO FL 33037		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-1223229	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DEGRAAFF, WAYNE A 99264 OVERSEAS HWY KEY LARGO FL 33037				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City FL Zip Code	
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 _____ (NOTE: Registered Agent's signature is required when filing this statement.) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME		TITLE	NAME	
STREET ADDRESS	STREET ADDRESS		STREET ADDRESS	STREET ADDRESS	
CITY- ST- ZIP	CITY- ST- ZIP		CITY- ST- ZIP	CITY- ST- ZIP	
	☒ Delete			☐ Change ☐ Addition	
	DEGRAAFF, MARTHA				
	261 MOHAWK STREET				
	TAVERNIER FL 33070				
	☒ Delete			☐ Change ☐ Addition	
	DEGRAAFF, ALLEN				
	261 MOHAWK STREET				
	TAVERNIER FL 33070				
	☒ Delete			☐ Change ☐ Addition	
	P. DeGraaff, Wayne A			Wayne A. DeGraaff	
	7 Orange Dr.			7 Orange Dr.	
	Key Largo, Fl. 33037			Key Largo, Fl. 33037	
	☐ Delete			☐ Change ☐ Addition	
	☐ Delete			☐ Change ☐ Addition	
	☐ Delete			☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 information required.					
SIGNATURE: 			Date: 1-29-07 Daytime Phone: 305-451-4460		