2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2008
Secretary of State

DOCUMENT# P04000109410

Entity Name: A TODAH ENTERPRISES, INC.

Current Principal Place of Business:

1929 CALUSA TRAIL
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

10263 WHISPERING FOREST DR
APT #901
JACKSONVILLE, FL 32257 US

Current Mailing Address:

POST OFFICE BOX 65635
RIDGEWOOD, FL 32065

New Mailing Address:

10263 WHISPERING FOREST DR
APT # 901
JACKSONVILLE, FL 32257

FEI Number: 84-1662714 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISHER, PATRICIA E
1929 CALUSA TRAIL
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

FISHER, PATRICIA E
10263 WHISPERING FOREST DR
APT # 901
JACKSONVILLE, FL 32257 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: _____ 05/29/2008
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: MCMILLAN, SHERYL Y
Address: 1602 DECLARATION DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: VP ( ) Delete
Name: FISHER, PATRICIA
Address: 1929 CALUSA TRAIL
City-St-Zip: MIDDLEBURG, FL 32068 US

Title: VP ( ) Delete
Name: FISHER, ARLENE M
Address: 1935 WOODLAKE DRIVE
City-St-Zip: ORANGE PARK, FL 30023 US

Title: VP ( ) Delete
Name: LUSTER, MILDRED L
Address: 8117 THRASHER AVENUE
City-St-Zip: JACKSONVILLE, FL 32219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: FISHER, PATRICIA
Address: 10263 WHISPERING FOREST DR APT #901
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP (X) Change ( ) Addition
Name: FISHER, ARLENE M
Address: 10263 WHISPERING FOREST DR APT # 424
City-St-Zip: JACKSONVILLE, FL 32257 US

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: PATRICIA FISHER VP 05/29/2008
Electronic Signature of Signing Officer or Director — Date