


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000126265  
 1. Entity Name  
 PHARR BOUNDS HOLDINGS INC



Principal Place of Business 1306 E. CERVANTES ST. SUITE C PENSACOLA, FL 32501	Mailing Address 1306 E. CERVANTES ST. SUITE C PENSACOLA, FL 32501
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**DO NOT WRITE IN THIS SPACE**



04202007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1568361	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 PHARR, JOHN T JR.  
 1306 E CERVANTES ST.  
 SUITE C  
 PENSACOLA, FL 32501

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE P	PHARR, JOHN T JR. 1306 E. CERVANTES ST. SUITE C PENSACOLA, FL 32501
TITLE VP	BOUNDS, ALBERT A III 1306 E. CERVANTES ST. SUITE C PENSACOLA, FL 32501
TITLE NAME	
TITLE NAME	
TITLE NAME	
TITLE NAME	

U00000747095  
 05/17/07-80013-001 150.00

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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: 4/21/07 Daytime Phone #: 850 5722846