

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90047 048 ***150.00

DOCUMENT # P04000127872

1. Entity Name
DISTINCTIVE INVESTORS, INC.



Principal Place of Business 853 PHILLIPS DRIVE FREEPORT, FL 32439	Mailing Address 853 PHILLIPS DRIVE FREEPORT, FL 32439
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DO NOT WRITE IN THIS SPACE

4006100



02072008 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0382296	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**BRIDGE, LANA M
 645 PHILLIPS DR
 FREEPORT, FL 32439**

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, 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 NAME STREET ADDRESS CITY-ST-ZIP	PD BYRD, JERRY L 853 PHILLIPS DRIVE FREEPORT, FL 32439
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BRIDGE, LANA M 645 PHILLIPS DR FREEPORT, FL 32439
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: *Lana M. Bridge*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 11, 08 850-865-2220
 Date Daytime Phone #