

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144071

Entity Name: SPEIGHT INC

FILED  
Apr 28, 2007  
Secretary of State

## Current Principal Place of Business:

3463 TREVINO CIRCLE  
TITUSVILLE, FL 32780

## New Principal Place of Business:

3463 TREVINO CIRCLE  
TITUSVILLE, FL 32780 US

## Current Mailing Address:

3463 TREVINO CIRCLE  
TITUSVILLE, FL 32780

## New Mailing Address:

3463 TREVINO CIRCLE  
TITUSVILLE, FL 32780 US

FEI Number: 20-1742106

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SPEIGHT, DENNIS J  
3463 TREVINO CIRCLE  
TITUSVILLE, FL 32780 US

## Name and Address of New Registered Agent:

SPEIGHT, CONNIE W  
3463 TREVINO CIRCLE  
TITUSVILLE, FL 32780 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: CONNIE W SPEIGHT

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SPEIGHT, DENNIS J  
Address: 3463 TREVINO CIRCLE  
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete  
Name: SPEIGHT, CONNIE W  
Address: 3463 TREVINO CIRCLE  
City-St-Zip: TITUSVILLE, FL 32780

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SPEIGHT, CONNIE W  
Address: 3463 TREVINO CIRCLE  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: O (X) Change ( ) Addition  
Name: WHEELER, CHARLIE E  
Address: 8305 CAMP DURANT ROAD  
City-St-Zip: RALEIGH, NC 27614 US

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: CONNIE W SPEIGHT

D

04/28/2007

Electronic Signature of Signing Officer or Director

Date