

2007 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-18-2007 90192 043 ***150.00

DOCUMENT # P05000013273 1. Entity Name FARNUM INVESTMENTS, INC.																											
Principal Place of Business 305 N POMPAÑO BEACH BLVD 1505 POMPAÑO BEACH, FL 33062		Mailing Address 305 N POMPAÑO BEACH BLVD 1505 POMPAÑO BEACH, FL 33062																									
2. Principal Place of Business - No P.O. Box # 2833 N. COURSE DR. Suite, Apt. #, etc. #201		3. Mailing Address 2833 N. COURSE DR. Suite, Apt. #, etc. #201																									
City & State POMPAÑO BEACH, FL		City & State POMPAÑO Bch, FL																									
Zip 33069		Zip 33069																									
Country 		Country 																									
4. FEI Number 61-1482434		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 FARNUM, CARONLEE R 305 N POMPAÑO BEACH BLVD 1505 POMPAÑO BEACH, FL 33062		7. Name and Address of New Registered Agent Name FARNUM, CARONLEE R. Street Address (P.O. Box Number is Not Acceptable) 2833 N. COURSE DR. #201 City POMPAÑO BEACH FL Zip Code 33069																									
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 <u><i>Caronlee Farnum</i></u> DATE <u>5-8-07</u> <small>Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when reappointing)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> D FARNUM, CARONLEE R 305 N POMPAÑO BCH BLVD 1505 POMPAÑO BEACH, FL 33062 </td> </tr> <tr> <td></td> <td style="text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FARNUM, CARONLEE R 305 N POMPAÑO BCH BLVD 1505 POMPAÑO BEACH, FL 33062		<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> D FARNUM, CARONLEE R. 2833 N. COURSE DR. #201 POMPAÑO BEACH, FL 33069 </td> </tr> <tr> <td></td> <td style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FARNUM, CARONLEE R. 2833 N. COURSE DR. #201 POMPAÑO BEACH, FL 33069		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u><i>Caronlee Farnum</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>5-8-07</u> Daytime Phone # <u>954 709 8564</u>																									

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