



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # P05000042578	
1. Entity Name ANTIGUA NALL, INC.	

Principal Place of Business 119 EUCLID AVE BIRMINGHAM, AL 35213	Mailing Address 119 EUCLID AVE BIRMINGHAM, AL 35213
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DO NOT WRITE IN THIS SPACE



04182007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2557411	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WALTERS, ELIZABETH J ESQ
221 MCKENZIE AVE
PANAMA CITY, FL 32401**

**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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NALL, J WALLACE JR 119 EUCLID AVE BIRMINGHAM, AL 35213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHATLEY, KATHERINE N 119 EUCLID AVE BIRMINGHAM, AL 35213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NALL, J WALLACE III 119 EUCLID AVE BIRMINGHAM, AL 35213
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/11/07-80034-018 150.00

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: *M. Nall* **4-19-07** **(205) 879-7720**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #