

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P05000042848**

1. Entity Name  
SELDOM REST VENTURES, INC.



Principal Place of Business  
103 MAGNOLIA DRIVE  
LADY LAKE, FL 32159

Mailing Address  
103 MAGNOLIA DRIVE  
LADY LAKE, FL 32159



04162007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2568026

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

RODGERS, LINDA M  
103 MAGNOLIA DRIVE  
LADY LAKE, FL 32159

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (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  
NAME EHRHART, ROY S II  
STREET ADDRESS 3220 W. 71ST AVENUE  
CITY-ST-ZIP ANCHORAGE, AK 99502

TITLE S/T  
NAME RODGERS, LINDA M  
STREET ADDRESS 103 MAGNOLIA DRIVE  
CITY-ST-ZIP LADY LAKE, FL 32159

TITLE VP  
NAME EHRHART, ROY C  
STREET ADDRESS 7453 TYRE DRIVE  
CITY-ST-ZIP ANCHORAGE, AK 99502

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

U000000720488  
05/01/07-80107-005 150.00

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: Linda M. Rodgers Sec./Treas. 04-19-2007 (352)398-7498  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

LINDA M. RODGERS