

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000068439

Entity Name: 40 RED, INC.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

873 NW 58TH CT
OCALA, FL 34482

New Principal Place of Business:

P.O. BOX 770133
OCALA, FL 34477

Current Mailing Address:

873 NW 58TH CT
OCALA, FL 34482

New Mailing Address:

P.O. BOX 770133
OCALA, FL 34477

FEI Number: 20-2744585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, REBEKAH
873 NW 58TH CT
OCALA, FL 34482 US

Name and Address of New Registered Agent:

GARY, PIERRE
P.O. BOX 770133
OCALA, FL 34477 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: GARY PIERRE

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PIERRE, GARY
Address: 775 NW 57TH CT
City-St-Zip: OCALA, FL 34482

Title: SD () Delete
Name: WATSON, REBEKAH
Address: 873 NW 58TH CT
City-St-Zip: OCALA, FL 34482

Title: T () Delete
Name: COLLIER, SHATOYA
Address: 775 NW 57TH CT
City-St-Zip: OCALA, FL 34482

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CREWS, ANTONIO
Address: 64 JUNIPER TRAK
City-St-Zip: OCALA, FL 34480

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY PIERRE

PD

04/24/2006

Electronic Signature of Signing Officer or Director

Date