

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000070883

1. Entity Name
PETE WILLETT ENTERPRISES, INC.



Principal Place of Business
719 S. BEACH ST.
UNIT 305
DAYTONA BEACH, FL 32114

Mailing Address
719 S. BEACH ST.
UNIT 305
DAYTONA BEACH, FL 32114

FILED
Jul 18, 2008 08:00 AM
Secretary of State



07102008 No Chg-P CR2E034 (11/05)

4. FEI Number
56-2520153

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WILLETT, GERALD W
719 S. BEACH ST.
UNIT 305
DAYTONA BEACH, FL 32114

**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

U000000355542
07/18/08-80003-003 150.00

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
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
F
WILLETT, GERALD W
719 S. BEACH ST. - UNIT 305
DAYTONA BEACH, FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-14-08

Date

386-689-6482

Daytime Phone