

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000097245 1. Entity Name A GOOD MEASURE, INC.					
Principal Place of Business 535 N.E. 9TH AVENUE FORT LAUDERDALE FL 33301 US			Mailing Address 535 N.E. 9TH AVENUE FORT LAUDERDALE FL 33301 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 20-3156240 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				1st MOORE CR2E034 (10/06)	
6. Name and Address of Current Registered Agent LAYTHE, WILLIAM F 535 N.E. 9TH AVENUE FORT LAUDERDALE FL 33301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Added to Fees ☐ Trust Fund Contribution.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LAYTHE, WILLIAM F 535 N.E. 9TH AVENUE FORT LAUDERDALE FL 33301 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	U00000640780 02/28/07-80079-009 150.00 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LAYTHE, KAREN K 535 N.E. 9TH AVENUE FORT LAUDERDALE FL 33301 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC LAYTHE, KAREN K 535 N.E. 9TH AVENUE FORT LAUDERDALE FL 33301 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TR LAYTHE, WILLIAM F 535 N.E. 9TH AVENUE FORT LAUDERDALE FL 33301 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *William F. Laythe* 2/17/07 (954) 832-0115
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 WILIAM F LAYTHE PRESIDENT
 Date Daytime Phone #