

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100917

Entity Name: 1 NATION PAVERS INC

FILED  
Jun 22, 2007  
Secretary of State

## Current Principal Place of Business:

65 A 12TH STREET  
SHALIMAR, FL 32579 US

## New Principal Place of Business:

408 CARMEL DRIVE  
FORT WALTON BEACH, FL 32547 US

## Current Mailing Address:

PO BOX 2698  
FORT WALTON BEACH, FL 32549 US

## New Mailing Address:

FEI Number: 20-3174809      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FANELLA, NICHOLAS R  
434 TANGLEWOOD DRIVE  
FORT WALTON BEACH, FL 32547 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: CORBO, LOUIS M  
Address: 65 A 12TH STREET  
City-St-Zip: SHALIMAR, FL 32579 US

Title: VP (X) Delete  
Name: WELBORN, KATHRYN J  
Address: 65 A 12TH STREET  
City-St-Zip: SHALIMAR, FL 32579 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: CORBO, LOUIS M  
Address: 408 CARMEL DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

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

I hereby certify that the information supplied with this filing does not qualify 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: LOUIS M CORBO

PSD

06/22/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date