2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 31, 2008 08:00 Al **DOCUMENT # P05000119427 Secretary of State** NORTH FLORIDA PECAN ROUTE 207, INC. Principal Place of Business Mailing Address 904 REDBUD TRAIL 2540 S.R. 207 ST. AUGUSTINE, FL 32086 ST. AUGUSTINE, FL 32086 03262008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3377002 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HEAD, HARLEY D III DO NOT WRITE 904 REDBUD TRAIL ST. AUGUSTINE, FL 32086 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 SIGNATURE 9. Election Campaign Financing \$5.00 May 8e FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS U000000874803 TITLE 04/11/08-80007-007 150.00 HEAD, DOROTHY 3808 MAGNOLIA POINT LANE STREET ADDRESS ST. AUGUSTINE, FL 320866857 CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TELLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 in Block 12 in Bl changed, or on an attachmen

STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS