2007 FOR PROFIT CORPORATION ANNUAL REPORT

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Feb 05, 2007 8:00 am
Secretary of State
02-05-2007 90082 013 ***150.00

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01152007 Chg-P CR2E034 (12/06)

DOCUMENT # P05000125786

1. Entity Name
WILD GINGER STUDIOS INC.

Principal Place of Business	Mailing Address
220 PALMER STREET GREEN COVE SPRINGS, FL 32043	~~14280-18 BEACH BLVD.~~ ~~#330~~ ~~JACKSONVILLE, FL 32250 US~~

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	220 PALMER STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: GREEN COVE SPRINGS
Zip / Country	Zip: FL 32043 / Country: US

4. FEI Number: ~~20-3460587~~ ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BARR, AJ ~~14280-18 BEACH BLVD.~~ ~~#330~~ ~~JACKSONVILLE, FL 32250~~	Name Street Address (P.O. Box Number is Not Acceptable): 5000 - 18 Hwy 17 # 234 City: ORANGE PARK FL Zip Code: 32003

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $500.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$8.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BARR, AJ ~~14280-18 BEACH BLVD., #330~~ ~~JACKSONVILLE, FL 32250~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5000 - 18 Hwy 17 # 234 ORANGE PARK, FL 32003
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BRUNETTI, SAM ~~14280-18 BEACH BLVD., #330~~ ~~JACKSONVILLE, FL 32250~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5000 - 18 Hwy 17 # 234 ORANGE PARK, FL 32003
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIR PERSONS, KAREN ~~4572 INDIGO PLANT COURT~~ ~~JACKSONVILLE, FL 32224~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2940 Hickory Knolls GREEN COVE SPRINGS, FL 32043
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE: AJ Barr AJ BARR 31 Jan 07 904-284-4844
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #