

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162744

FILED
Jan 05, 2007
Secretary of State

Entity Name: FARRAR, STREET & STREET, INC.

Current Principal Place of Business:

8652 PEBBLE CREEK LANE
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8652 PEBBLE CREEK LANE
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 42-1686463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STREET, LINDA
8652 PEBBLE CREEK LANE
JACKSONVILLE, FL 32256 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: FARRAR, DONALD
Address: 5096 BULL RUN ROAD
City-St-Zip: NASHVILLE, TN 37015

Title: VP/D () Delete
Name: STREET, MARGARET
Address: 5096 BULL RUN ROAD
City-St-Zip: NASHVILLE, TN 37015

Title: T () Delete
Name: STREET, ROBERT JR.
Address: 8652 PEBBLE CREEK LANE
City-St-Zip: JACKSONVILLE, FL 32256

Title: S/D () Delete
Name: STREET, LINDA
Address: 8652 PEBBLE CREEK LANE
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD FARRAR

PD

01/05/2007

Electronic Signature of Signing Officer or Director

Date