
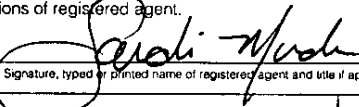
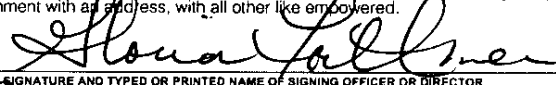


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90167 024 ***150.00

DOCUMENT # P05161 1. Entity Name WORRELL ENTERPRISES, INC.					
Principal Place of Business 1105 N. FEDERAL HWY BOYNTON BEACH, FL 33435				Mailing Address 1105 N. FEDERAL HWY BOYNTON BEACH, FL 33435	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 205 Ranchitos Road			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02162007 Chg-P CR2E034 (12/06)	
City & State		City & State Taos Nm		4. FEI Number 62-1236304	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
87571		USA		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent WINTZER, WILLIAM A 1105 N. FEDERAL HWY BOYNTON BEACH, FL 33435				7. Name and Address of New Registered Agent Name Sandi Morich Street Address (P.O. Box Number is Not Acceptable) 1105 N. Federal Hwy City Boynton Beach FL Zip Code 87571	
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 3/20/07	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOODYEAR, KIMBERLY A 125 LA POSTA RD TAOS, NM 87571	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Gloria Foellmer 205 Ranchitos Road Taos Nm 87571	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD WORRELL, THOMAS E. JR. 1105 N. FEDERAL HWY. BOYNTON BEACH, FL 33435	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WORRELL, ODETTA A 1105 N. FEDERAL HWY BOYNTON BEACH, FL 33435	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BECKER, LAURA 125 LA POSTA RD TAOS, NM 87571	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: 			3-15-07 505-758-5090		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Gloria Foellmer			Date Daytime Phone #		