

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2007 8:00 am**  
**Secretary of State**

05-02-2007 90092 041 \*\*\*150.00

DOCUMENT # P06000000319

1. Entity Name  
ALL THE RIGHT MOVES, INC.



Principal Place of Business  
4323 67TH AVENUE CIRCLE EAST  
SARASOTA, FL 34243

Mailing Address  
4323 67TH AVENUE CIRCLE EAST  
SARASOTA, FL 34243

40100703



2. Principal Place of Business - No P.O. Box #  
2258 72ND AVE. E.  
Suite, Apt. #, etc.

3. Mailing Address  
PO Box 20581  
Suite, Apt. #, etc.

04272007 Chg-P CR2E034 (12/06)

City & State  
Sarasota, FL  
Zip  
34243  
Country  
USA

City & State  
Bradenton, FL  
Zip  
34204  
Country  
USA

4. FEI Number  
20-4051170  
Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

LEGERE, FREDERICK J IV  
4323 67TH AVENUE CIRCLE EAST  
SARASOTA, FL 34243

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

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: Amy Legere DATE: 4.28.07  
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 \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
LEGERE, FREDERICK J IV  
4323 67TH AVENUE CIRCLE EAST  
SARASOTA, FL 34243 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
KLOIBER, PATRICK S  
4323 67TH AVENUE CIRCLE EAST  
SARASOTA, FL 34243 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
LEGERE, AMY  
3823 67TH AVE. E.  
SARASOTA, FL 34243 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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: Amy Legere DATE: 4.28.07 DAYTIME PHONE: 941.330-1887  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR