

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P06000018353**

1. Entity Name

VAUGHANS COUNTRY STORE, INC.



Principal Place of Business

34550 BLANTON RD.  
DADE CITY, FL 33523

Mailing Address

34550 BLANTON RD.  
DADE CITY, FL 33523



04102008

No Chg-P

CR2E034 (11/05)

4. FEI Number

20-4121511

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

VAUGHAN, THEODORE R  
35400 BLANTON RD.  
DADE CITY, FL 33523

**DO NOT WRITE  
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 registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME VAUGHAN, THEODORE R  
STREET ADDRESS 35400 BLANTON RD.  
CITY-ST-ZIP DADE CITY, FL 33523

TITLE D  
NAME VAUGHAN, DIANE MCCABE  
STREET ADDRESS 35400 BLANTON RD.  
CITY-ST-ZIP DADE CITY, FL 33523

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

U000000893443  
04/23/08-80104-019 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Theodore R. Vaughan* THEODORE R. VAUGHAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/08

Date

352-527-5099  
352-233-8305

Daytime Phone #