2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 06, 2007 8:00 am Secretary of State DOCUMENT # P06000023644 03-27-2007 90012 014 ***150 00 1. Entity Name MIKE BRAXTÓN ÇÂRETAKING. INC. Principal Place of Business *-iling Address 2881 HARNEY RD ∠881 HARNEY RD BOWLING GREEN, FL 33834 BOWLING GREEN, FL 33834 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04032007 CR2E034 (12/06) Chg-P City & State City & State 4 FEI Number 20 - 43362 Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRAXTON, FRED M Street Address (P.O. Box Number is Not Acceptable) 2881 HARNEY RD **BOWLING GREEN, FL 33834** 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 femiliar 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, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BRAXTON, FRED M NAME STREET ADDRESS 2881 HARNEY RD STREET ADDRESS CITY-ST-ZIP BOWLING GREEN, FL 33834 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME BRAXTON, BRENDA NAME STREET ADDRESS 2881 HARNEY RD STREET ADDRESS CITY-ST-ZIP BOWLING GREEN, FL 33834 CITY-ST-ZIP TITLE Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SY-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I turther 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 trusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment of the property of the component of the corporation of the corporation or the corporation of the corp

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DOCUMENT # P06000023644	
MIKE BRAXTON CARETAKING, INC.	
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2881 HARNEY RD 2881 HARNEY RD	ATTACHMENT 66008237
BOWLING GREEN, FL 33834 BOWLING GREEN, FL 33834	(Q(Q(O)8~2))
2 Principal Place of Business - No.RO. Box 2 3 Million Address + HARNEY BOAD 288 HARNEY	ROAO
Suite, Apr. etc. Suite, Apr. etc.	03132007 Chg-P CR2E034 (12/08)
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33834 USA 33834 B	5. Certificate of Status Desired Security Securi
6. Name and Address of Curront Registered Agent	7. Name and Address of New Registered Agent Name
BRAXTON, FRED M 2881 HARNEY RD	Street Address (P.O. Box Number is Not Acceptable)
BOWLING GREEN, FL 33834	
	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.	
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Signature, typed or protect name of regulated against and afte if applicable. (NOTE: Regulated	d Agent algrature raquirild when retinatory) DATE
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12. I hereby certify that the information supplied with this filling does not qualify for the extended on this report or suppliemental report is tyle and accurate and that my signal of the corporation or the refereiver or install empoyered to asseque this report as required, or on an attachment with an adgress with real other lift empowered.	. 1
12. I hereby certify that the information supplied with the filing does not qualify for the exidenced on this report or supplied region is yield and securate and that my signed of the corporation or the regions or haster employered to execute this report as required thanged, or on an attach than with an address, given other and empowered. SIGNATURE:	emptions contained in Chapter 119, Florida Statutes, I further certify that the information ture shall have the same legal effect as if made under oath; that I am an officer or director red by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if