

607 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-05-2007 90307 001 ***150.00
04-05-2007 90307 002 ****75.00

DOCUMENT # P06000062687																																																																									
1. Entity Name PHILOSOTEEES, INC.																																																																									
Principal Place of Business 209 TRAIL BRIDGE COURT WINTER GARDEN, FL 34787 US			Mailing Address 717 EAST OAK STREET KISSIMMEE, FL 34744 US																																																																						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																							
City & State		City & State																																																																							
Zip	Country	Zip	Country	4. FEI Number 20-4815431																																																																					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable																																																																					
6. Name and Address of Current Registered Agent MOHR, TRACY 209 TRAIL BRIDGE COURT WINTER GARDEN, FL 34787			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 _____ Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reappointing)																																																																									
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																																																																							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 85%; padding: 2px;"> PD MOHR, TRACY 209 TRAIL BRIDGE COURT WINTER GARDEN, FL 34787 </td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 85%; padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"> VSTD RISCH, WENDY 19819 MARYWARD CROSSING ESTERO, FL 33928 </td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> <td style="padding: 2px;">CITY - ST - ZIP</td> <td style="padding: 2px;"></td> </tr> </table>						10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE	PD MOHR, TRACY 209 TRAIL BRIDGE COURT WINTER GARDEN, FL 34787	TITLE	☐ Change ☐ Addition	NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY - ST - ZIP		CITY - ST - ZIP		TITLE	VSTD RISCH, WENDY 19819 MARYWARD CROSSING ESTERO, FL 33928	TITLE	☐ Change ☐ Addition	NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY - ST - ZIP		CITY - ST - ZIP		TITLE		TITLE	☐ Change ☐ Addition	NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY - ST - ZIP		CITY - ST - ZIP		TITLE		TITLE	☐ Change ☐ Addition	NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY - ST - ZIP		CITY - ST - ZIP	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																							
TITLE	PD MOHR, TRACY 209 TRAIL BRIDGE COURT WINTER GARDEN, FL 34787	TITLE	☐ Change ☐ Addition																																																																						
NAME		NAME																																																																							
STREET ADDRESS		STREET ADDRESS																																																																							
CITY - ST - ZIP		CITY - ST - ZIP																																																																							
TITLE	VSTD RISCH, WENDY 19819 MARYWARD CROSSING ESTERO, FL 33928	TITLE	☐ Change ☐ Addition																																																																						
NAME		NAME																																																																							
STREET ADDRESS		STREET ADDRESS																																																																							
CITY - ST - ZIP		CITY - ST - ZIP																																																																							
TITLE		TITLE	☐ Change ☐ Addition																																																																						
NAME		NAME																																																																							
STREET ADDRESS		STREET ADDRESS																																																																							
CITY - ST - ZIP		CITY - ST - ZIP																																																																							
TITLE		TITLE	☐ Change ☐ Addition																																																																						
NAME		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 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: <u>Tracy Mohr</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				<u>3/30/07</u> Date																																																																					
Daytime Phone #																																																																									

66009394



02252007 Chg-P CR2E034 (12/06)