

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000076272

1. Entity Name
MAD MONKEY, INC



Principal Place of Business
2410 PINEWAY DR
ORLANDO, FL 32839

Mailing Address
2410 PINEWAY DR
ORLANDO, FL 32839

FILED
Sep 15, 2008 08:00 AM
Secretary of State



07032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4999375	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BATTERMAN, ANTHONY D
2410 PINEWAY DR
ORLANDO, FL 32839

**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 Anthony D. Batterman Anthony D. BATTERMAN 9-10-08
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
Due by September 12, 2008**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATTERMAN, ANTHONY D 2410 PINEWAY DR ORLANDO, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WYATT, MARK A 2410 PINEWAY DR ORLANDO, FL 32839
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09/15/08-80003-002 150.00

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: Anthony D. Batterman Anthony D. BATTERMAN 9-10-08 407-629-1197
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #