## **2008 FOR PROFIT-CORPORATION ANNUAL REPORT**

## FILED Apr 30, 2008 08:00 Al Secretary of State **DOCUMENT # P06000083385** JEANE B. MYDDELTON, P.A. Principal Place of Business Mailing Address 3303 THOMASVILLE ROAD 3303 THOMASVILLE ROAD TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32308 No Chg-P CR2E034 (11/05) 04282008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5091191 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent MYDDELTON, JEANE B DO NOT WRITE 3303 THOMASVILLE ROAD TALLAHASSEE, FL 32308 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ns/23/03-80083-023 150.00 TITLE MYDDELTON, JEANE B NAME STREET ADDRESS 3303 THOMASVILLE ROAD CITY-ST-ZIP TALLAHASSEE, FL 32308 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY, ST. 7IP TITLE

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:

NAME STREET ADDRESS CITY-ST-ZIP