

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000093264

FILED  
Feb 27, 2007  
Secretary of State

Entity Name: WORTHE ENTERPRISES, INCORPORATED

**Current Principal Place of Business:**

11310 ASTON HALL DRIVE  
JACKSONVILLE, FL 322460645 US

**New Principal Place of Business:**

**Current Mailing Address:**

11310 ASTON HALL DRIVE  
JACKSONVILLE, FL 322460645 US

**New Mailing Address:**

FEI Number: 20-5167684

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOWENS, WILLIAM R  
11310 ASTON HALL DRIVE  
JACKSONVILLE, FL 322460645 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: BOWENS, WILLIAM R  
Address: 11310 ASTON HALL DRIVE  
City-St-Zip: JACKSONVILLE, FL 322460645 US

Title: SECY ( ) Delete  
Name: BOWENS, WILLIAM R  
Address: 11310 ASTON HALL DRIVE  
City-St-Zip: JACKSONVILLE, FL 322460645 US

Title: TREA ( ) Delete  
Name: BOWENS, WILLIAM R  
Address: 11310 ASTON HALL DRIVE  
City-St-Zip: JACKSONVILLE, FL 322460645 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CEO ( ) Change (X) Addition  
Name: PROVOW, JEFFREY S  
Address: 1956 MAKARIOS DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32080 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WM. ROY BOWENS

PRES

02/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date