


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

07 JUL 11 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000101585	
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Principal Place of Business 1805 CREIGHTON RD PENSACOLA, FL 32504	Mailing Address 24250 PERDIDO BCH BLVD #4074 ORANGE BEACH, AL 36561
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address 1805 CREIGHTON RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State PENSACOLA, FL
Zip	Country
Zip	Country



01112007 Chg-P CR2E034 (12/06)

4. FEI Number 20-5449024	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 HOUGABOOM, MICHAEL R 1805 CREIGHTON RD PENSACOLA, FL 32504	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 Michael R. Hougaboom DATE 1-22-07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOUGABOOM, MICHAEL R 24250 PERDIDO BCH BLVD #4074 ORANGE BEACH, AL 36561 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Michael R. Hougaboom DATE 1-22-07 251-233-0736

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Document corrected per Deborah Hougaboom. Corp did not receive rejection ltr.