

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104547

FILED  
Jan 29, 2007  
Secretary of State

Entity Name: DESPERATE ENDEAVORS, INC.

## Current Principal Place of Business:

101 PEEPLES LANE  
PALATKA, FL 32177

## New Principal Place of Business:

1050 HIGHWAY 19 SOUTH  
PALATKA, FL 32177 US

## Current Mailing Address:

101 PEEPLES LANE  
PALATKA, FL 32177

## New Mailing Address:

1050 HIGHWAY 19 SOUTH  
PALATKA, FL 32177 US

FEI Number: 20-5388610

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVENPORT, SONDR H  
101 PEEPLES LANE  
PALATKA, FL 32177 US

## Name and Address of New Registered Agent:

DAVENPORT, SONDR H  
1050 HIGHWAY 19 SOUTH  
PALATKA, FL 32177 US

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: SONDR H. DAVENPORT

01/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: DAVENPORT, SONDR H  
Address: 101 PEEPLES LANE  
City-St-Zip: PALATKA, FL 32177

Title: VTD ( ) Delete  
Name: DAVENPORT, TOMIE D JR.  
Address: 101 PEEPLES LANE  
City-St-Zip: PALATKA, FL 32177

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: DAVENPORT, SONDR H  
Address: 101 PEEPLES LANE  
City-St-Zip: PALATKA, FL 32177

Title: D (X) Change ( ) Addition  
Name: DAVENPORT, TOMIE D JR.  
Address: 101 PEEPLES LANE  
City-St-Zip: PALATKA, FL 32177

Title: VPD ( ) Change (X) Addition  
Name: SHERAR, JESSICA R  
Address: 147 PINE TREE ROAD  
City-St-Zip: PALATKA, FL 32177 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: SONDR H. DAVENPORT

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01/29/2007

Electronic Signature of Signing Officer or Director

Date