

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90092 049 ***150.00

DOCUMENT # P06000124659 1. Entity Name ANNA MARKHAM ENTERPRISES, INC.																													
Principal Place of Business 4943 PELICAN DRIVE NEW PORT RICHEY, FL 34652			Mailing Address 4943 PELICAN DRIVE NEW PORT RICHEY, FL 34652																										
2. Principal Place of Business - No P.O. Box # 716 Wesley Ave		3. Mailing Address Suite, Apt. #, etc. Unit 3																											
City & State Tarpon Springs, FL		City & State City & State		4. FEI Number 51-0622917																									
Zip 34689		Country U.S.A		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent BREWSTER, SANDRA ANN 4943 PELICAN DRIVE NEW PORT RICHEY, FL 34652				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>PD BREWSTER, SANDRA ANN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4943 PELICAN DRIVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW PORT RICHEY, FL 34652</td> <td></td> </tr> </table>			TITLE	NAME	☐ Delete	NAME	PD BREWSTER, SANDRA ANN		STREET ADDRESS	4943 PELICAN DRIVE		CITY-ST-ZIP	NEW PORT RICHEY, FL 34652		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>Pipkin, Gregory Curtis</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4943 Pelican Dr.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>New Port Richey, FL 34652</td> <td></td> </tr> </table>			TITLE	NAME	☐ Change ☒ Addition	NAME	Pipkin, Gregory Curtis		STREET ADDRESS	4943 Pelican Dr.		CITY-ST-ZIP	New Port Richey, FL 34652	
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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: 				Date 4-19-08																									