

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P07000036295

1. Entity Name
ENDEAVOR ONE PROPERTIES & INVESTMENTS, INC.



Principal Place of Business
209 PALMETTO STREET
AUBURNDALE, FL 33823 US

Mailing Address
209 PALMETTO STREET
AUBURNDALE, FL 33823 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09222008

Chg-P

CR2E034 (12/06)

4. FEI Number
20-8724754

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

READY, BILLY R
209 PALMETTO STREET
AUBURNDALE, FL 33823

7. Name and Address of New Registered Agent

Name: **Marcus Stern**
Street Address (P.O. Box Number is Not Acceptable)
209 Palmetto Street
Auburndale, FL 33823
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fee **700135983737**
09/18/08--01012--020 **35.00

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **STERN, MARCUS**
STREET ADDRESS **209 PALMETTO STREET**
CITY-ST-ZIP **AUBURNDALE, FL 33823**

TITLE **VP** ☒ Delete
NAME **READY, DONALD**
STREET ADDRESS **209 PALMETTO STREET**
CITY-ST-ZIP **AUBURNDALE, FL 33823**

TITLE **S/T** ☒ Delete
NAME **READY, RAY**
STREET ADDRESS **209 PALMETTO STREET**
CITY-ST-ZIP **AUBURNDALE, FL 33823**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **10/03/08--01014--003 **26.25**
CITY-ST-ZIP

TITLE **VP** ☒ Change ☐ Addition
NAME **Marcus Stern**
STREET ADDRESS **209 Palmetto Street**
CITY-ST-ZIP **Auburndale, FL 33823**

TITLE **S/T** ☒ Change ☐ Addition
NAME **Marcus Stern**
STREET ADDRESS **209 Palmetto Street**
CITY-ST-ZIP **Auburndale, FL 33823**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/25/08

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FILED

2008 OCT -2 PM 4:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

