

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000055013

FILED
Jan 02, 2008
Secretary of State

Entity Name: ALL SEASONS OUTDOOR POWER & PERFORMANCE, INC.

Current Principal Place of Business:

15207 WEST NEWBERRY ROAD
NEWBERRY, FL 32669

New Principal Place of Business:

Current Mailing Address:

15207 WEST NEWBERRY ROAD
NEWBERRY, FL 32669

New Mailing Address:

FEI Number: 20-8995996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, TONY S
5538-A NW 43RD STREET
GAINESVILLE, FL 32653 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: P () Delete
Name: ROSS, LARRY J
Address: 5538-A NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32653 US

Title: VP () Delete
Name: ROSS, TONY S
Address: 5538-A NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32653 US

Title: S/T (X) Delete
Name: SEAY, TRINA
Address: 5538-A NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSS, TONY S
Address: 5538-A NW 43RD STREET
City-St-Zip: GAINESVILLE, FL 32653 US

Title: S/T (X) Change () Addition
Name: SEAY, TRINA
Address: 14260 WEST NEWBERRY RD # 137
City-St-Zip: NEWBERRY, FL 32669 US

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

I hereby certify that the information supplied with this filing does not qualify 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: TRINA SEAY

S/T

01/02/2008

Electronic Signature of Signing Officer or Director

Date