

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000014011

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: THE COLLIFLOWER FAMILY CORP.

## Current Principal Place of Business:

PO BOX 328  
FLAT ROCK, NC 28731 US

## New Principal Place of Business:

348 CONNEMARA OVERLOOK DRIVE  
HENDERSONVILLE, NC 28739 US

## Current Mailing Address:

PO BOX 328  
FLAT ROCK, NC 28731 US

## New Mailing Address:

348 CONNEMARA OVERLOOK DRIVE  
HENDERSONVILLE, NC 28739 US

FEI Number: 65-0380576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHRYSTAL, NEIL R ESQ.  
DUNWODY WHITE & LANDON, P.A.  
550 BILTMORE WAY, STE. 810  
CORAL GABLES, FL 33134 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: D ( ) Delete  
Name: COLLIFLOWER, OWEN  
Address: PO BOX 328  
City-St-Zip: FLAT ROCK, NC 28731

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: COLLIFLOWER, OWEN  
Address: 348 CONNEMARA OVERLOOK DRIVE  
City-St-Zip: HENDERSONVILLE, NC 28739

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: OWEN COLLIFLOWER

D

04/26/2007

Electronic Signature of Signing Officer or Director

Date