2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P93000000991

EDWARD B. SCHLESSNINGER C.P.A., P.A.



Principal Place of Business

6015 MORROW ST E

SUITE 109

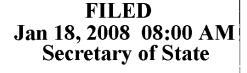
JACKSONVILLE, FL 32217

Mailing Address

6015 MORROW ST E

SUITE 109

JACKSONVILLE, FL 32217





DO NOT WRITE IN THIS SPACE

01142008 CR2E034 (11/05) No Chg-P

59-3158047

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

904.730.8148

6. Name and Address of Current Registered Agent

SCHLESSINGER, EDWARD B 8273 LAKE WOODBOURNE DR E JACKSONVILLE, FL 32217

DO NOT WRITE IN THIS SPACE

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							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			icing	\$5.00 May Be Added to Fees			:
10.	- OFFICERS AND DIREC	TORS	· · · · · · · · · · · · · · · · · · ·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHLESSINGER, EDWARD B. 8273 LAKE WOODBOURNE DRIVE, E JACKSONVILLE, FL	EAST			11000000 01/18/08-	788210 80032-007	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		,	e e e e e e e e e e e e e e e e e e e		e de la companya de l	
TITLE NAME STREET ADDRESS CITY-\$T-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS CITY-ST-ZIP	- 4.3	* · .;;					, ,
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.							