2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P93000028001 Mar 30, 2007 08:00 AM **Secretary of State** THE REAGAN CORPORATION Principal Place of Business Mailing Address 4340 OLD DIXIE HWY 4340 OLD DIXIE HWY VERO BEACH FL 32967 VERO BEACH FL 32967 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apl. #, olc. Suite, Apt #, otc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0420123 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo HUDSON, A. RONALD Street Address (P.O. Box Number is Not Acceptable) 4235 -27TH AVE VERO BEACH FL 32967 City 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 little it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition HILE Delete HIII REAGAN, WILLIE C NAME NAME 5686 41ST STREET STREET ADDRESS STREET ADDRESS VERO BEACH FL CITY-ST-7IP CITY-ST-7IP TITLE Delete ☐ Change Addition IIILE BARRINER, HARDY C NAMI 4140 58TH AVE STREET FADDRESS STREET ADDRESS VERO BEACH FL CHY-St-70 CITY-SI-ZIP Change DHE ☐ Delete TITLE Addition REAGAN, LUCINDA J NAME NAME 6237 W.FAYETTEVILLE ROAD STREET ADDRESS STREET ADDRESS CATY-ST-ZIP RIVERDALE GA CITY-ST-ZIP Delete THE ☐ Change ☐ Addition WILLIAMS, HELEN G 4340 OLD DIXIE HIGHWAY STREET ADDRESS STREET ADDRESS VERO BEACH FL CHY-ST-7IP CITY-ST-ZIP Addition 1010 Defete DHE ☐ Change THOMPKINS, ERNESTINE NAME NAME 1025 -E MILL STREET STREET ADDRESS STREET ADDRESS MELBOURNE FL CITY-ST-ZIP CiTY-SI-ZIP ☐ Addition DHE ☐ Dolele IIII E Change LANE, LEE A NAME NAME 4236-31ST AVE STREET ADDRESS STREET ADDRESS VERO BEACH FL CITY - ST- ZIP CHY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; that I am an efficer 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.

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