2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2007 8:00 am Secretary of State

1. Entity Nam	MENT # P93000087				04-26-2007	90238 002 ***15	0.00				
Principal Plac 1325 ATLAN FERNANDINA	Mailing Address PO BOX 706 FERNANDINA BEACH, FL	•			DIRA 1911 COLU TRUK ES:	II ABISA IDIBI WBIB IDIBB IMIN IK	risti (i (Bri				
Principal Place of Business - No P.O. Box # Mailing Add			iling Address								
1890 Suite, Apt.	S. 14th St	Suite, Apt. #, etc.	Suite, Apt. #. etc.				.,				
Suite	200			03212007	Chg-P	CR2E034 (12/06)					
City & State City & State					4. FEI Number 59-3211			ot Applicable			
Zip	Country	Zip	Country		5. Certificate o	f Status Desired	\$8.75 Ad				
6. Name and Address of Current Registered Agent				N	7. Name and A	Address of New R	legistered Agent				
MOCK, WI	LLIAM J JŘ	Name									
	ANTIC AVE. JINA REACH EL 32034		Street Address	(P.O. Box Number	is Not Acceptable	9)	1.1				
FERNANDINA BEACH, FL 32034				1890 S. 14th St. Suite 200							
		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 little if applicable. (NOTE Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees											
		Towns Front Course			.00 May Be ded to Fees						
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND	OO Trust Fund Contri DIRECTORS	ibution.	Add	led to Fees	CHANGES TO OFF	FICERS AND DIRECTOR				
After Ma	ay 1, 2007 Fee will be \$550.	OO Trust Fund Contri	ibution.	Add	ADDITIONS/C		FICERS AND DIRECTOR	IS IN 11			
After Ma	officers and	Trust Fund Contri	11. TITLE NAM STRE	Add	led to Fees			☐ Addition			
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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.

SI	IGN	ATU	JR	E:	

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/07

9044261-8822

Daytime Phone #