2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 10, 2008 8:00 am Secretary of State

DOCUMENT # P94000012936 1. Entity Name S.A.T.T., INC.					03-10-200	8 90053 025 ***15	0.00
Principal Place of Business 16913 LAKESIDE DR. SUITE 12 MONTVERDE, FL 34756		Mailing Address P.O. BOX 560009 MONTVERDE, FL 34756		(1988) 10 C	 :8:::	BIII BBISI IIRIB KBIB ABIDB IIMB BII	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02272008	Chg-P	CR2E034 (12/06)	
City & State		City & State		4. FEI Numbe 59-3224		} 	plied For t Applicable
Zip	Country	Zip	Country		of Status Desired	\$8.75 Add	itional
	6. Name and Address of Curren	t Registered Agent		7. Name and	Address of New	Registered Agent	
			Name				
H. CURTIS HARRISON 675 LINDEN ST. CLERMONT, FL 34711			Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
			i				
			City	FL Zip Code			
	named entity submits this statement fi tions of registered agent.	or the purpose of changing its r	egistered office or re	gistered agent, or bot	h, in the State of F	lorida. I am familiar with,	and accept
 SIGNATURE_	Signature, typed or printed name of registered ager	it and title if applicable (NOTE:	Registered Agent signature s	equired when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550	9. Election Campaig Trust Fund Contri		\$5.00 May Be Added to Fees			
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/	CHANGES TO OF	FICERS AND DIRECTORS	IN 11
TITLE	D	☐ Detete	TITLE			☐ Change	☐ Addition
NAME	HARRISON, W. CURTIS		NAME				
STREET ADDRESS	675 LINDEN ST.		STREET ADDRESS				
CITY-ST-ZIP	CLERMONT, FL 34711		CITY-ST-ZIP				_
THILE	D	☐ Delete	TITLE			Change	Addition
NAME	HARRISON, RUTH P		NAME STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	675 LINDEN ST. CLERMONT, FL 34711		CITY-ST-ZIP				
<u> </u>	TS	□ n.u.				☐ Change	Addition
TITLE NAME	HARRISON, CURTIS H	Delete	TITLE			☐ Change	☐ Addillon
STREET ADDRESS	675 LINDEN ST.		STREET ADDRESS				
CITY-S1-ZIP			STUTE LABORATOR				
	CLERMONT, FL 34711		CITY-ST-ZIP				
	CLERMONT, FL 34711	□ Delete	CITY-ST-ZIP			Change	☐ Addition
TITLE	į –	☐ Delete				☐ Change	Addition
TITLE	CLERMONT, FL 34711	☐ Celete	CITY-ST-ZIP			☐ Change	Addition
TITLE	CLERMONT, FL 34711 V TWEED, KENNETH I	☐ Delete	CITY-ST-ZIP FITLE NAME			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439	☐ Delete	CITY-ST-ZIP IIILE NAME STREET ADDRESS			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439 EUSTIS, FL 32726 P THOMPSON, CHERYL L		C11Y-ST-ZIP ITILE NAME STREET ADDRESS C11Y-ST-ZIP ITILE NAME				
TITLE NAME STREEL ADDRESS CITY-SI-ZIP TITLE NAME STREEL ADDRESS	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439 EUSTIS, FL 32726 P THOMPSON, CHERYL L 300 W WASHINGTON ST		CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439 EUSTIS, FL 32726 P THOMPSON, CHERYL L		C11Y-ST-ZIP ITILE NAME STREET ADDRESS C11Y-ST-ZIP ITILE NAME			☐ Change	☐ Addition
TITLE NAME STREEL ADDRESS CITY-SI-ZIP TITLE NAME STREEL ADDRESS	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439 EUSTIS, FL 32726 P THOMPSON, CHERYL L 300 W WASHINGTON ST		C11Y-S1-ZIP IIILE NAME STREET ADDRESS CITY-S1-ZIP IIILE NAME STHEET ADDRESS CITY-S1-ZIP TITLE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439 EUSTIS, FL 32726 P THOMPSON, CHERYL L 300 W WASHINGTON ST	☐ Delete	C11Y-S1-ZIP IIILE NAME STREET ADDRESS C11Y-S1-ZIP IIILE NAME STHEET ADDRESS C11Y-S1-ZIP TITLE NAME			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439 EUSTIS, FL 32726 P THOMPSON, CHERYL L 300 W WASHINGTON ST	☐ Delete	C11Y-ST-ZIP ITILE NAME STREET ADDRESS C11Y-ST-ZIP ITILE NAME STREET ADDRESS C11Y-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CLERMONT, FL 34711 V TWEED, KENNETH I 38636 C.R. 439 EUSTIS, FL 32726 P THOMPSON, CHERYL L 300 W WASHINGTON ST	□ Delete □ Delete	C11Y-S1-ZIP IIILE NAME STREET ADDRESS CITY-S1-ZIP IIILE NAME STHEET ADDRESS CITY-S1-ZIP THLE NAME STREET ADDRESS CITY-S1-ZIP		Eladida Control	☐ Change	Addition Addition

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.

SIGNATURE: Church L. Shampson President 3-4.08 407-469-332