2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P94000051560							19.4	E			
PETRA MANAGEMENT, INC.						07 AUG -7 PM 1:50					
Principal Place	e of Business	Mailing Address	Mailing Address				. Die i	ARY OF	STATE		
2275 ATLANT		PO BOX 330108 Atlantic Beach, FL 32233-0108					JALLAHA TALLAHA	SSEE, F	LORID	Des	
•	ace of Business - No P.O. Box #	3. Mailing Address									
1817] Suite, Apt.	N. 3rd Street	Suite, Apt. #, etc.				, 1451(64) 112 1				······································	
Suite, Apt.	#, etc.	Solle, Apr. #, etc.				08062007	Chg-P	CR2E03	4 (12/06)		
City & State Jacks	e onville Beach FL	City & State				4. FEI Number 59-3255491			<u> </u>	pplied For at Applicable	
Zip	Country	Zip	Country	iry		5. Certificate o	f Status Desired		8.75 Add		
32250 USA 6. Name and Address of Current R		gistered Agent					Address of New F	F	ee Require	d 	
No.						1. Ivalina alio i	1001633 01 1164 1	registered A	Reint	·····-	
SORRELL, MARY C 2275 ATLANTIC BLVD.					Street Address (P.O. Box Number is Not Acceptable)						
	BEACH, FL 32266		Street Address (1.0. Dox Number is Not Acceptable)								
	,										
				City				FL	Zip Cod	е	
8. The above	named entity submits this statement for	the purpose of changing its r	registered	d office or re	egister	ed agent, or both	, in the State of Fl	orida. I am fa	<u>I</u> miliar with,	and accept	
the obligati	ons of registered agent.										
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable (NOTE	Registered /	Agent signature	required	when reinstating)		DATE			
		(101)	riogiataroar	ngen ag ater							
Am	ended AR is \$61.25	9. Election Campaig Trust Fund Contri		ling 🔲	\$5. Adde	00 May Be	1 0 1 0 51 707—01811	0275 7008	312 **61.	25	
10.	OFFICERS AND D		11.			ADDITIONS/C	CHANGES TO OFF			S IN 11	
TITLE	TSD Delete		TITLE						Change	Addition	
STREET ADDRESS	.			STREET ADDRESS							
CITY-ST-ZIP			CITY-S	ST ZIP							
TITLE			TITLE	F	>				☐ Change	X Addition	
NAME Street Address			NAME STREET				ICHARD I				
CITY-ST-ZIP				$_{Y-ST-ZiP}$ 181			d Street		221	150	
TITLE		☐ Delete	TITLE		Jac	ksonvil	le Beach	ı, FL	☐ Change	Addition	
NAME Street address			NAME	T ADODECO							
CITY-ST-ZIP			CITY-S	T ADDRESS ST-ZIP							
TITLE	☐ Delete		TITLE				· · <u>- · · · · · · · · · · · · · · · · ·</u>		☐ Change	☐ Addition	
NAME			NAME								
STREET ADDRESS CITY-ST-ZIP			STREET	T ADDRESS							
TITLE		☐ Delete	TITLE		·				☐ Change	Addition	
NAME		- Delete	NAME								
STREE1 ADDRESS CITY-ST-ZIP				ADDRESS							
TITLE		<u>П</u> в	CITY-S	21 - ZIF			<u>-</u>		Chanca	□ Addison	
NAME		☐ Delete	FITLE NAME						☐ Change	Addition	
STREET ADDRESS				ADDRESS							
CITY-SI-ZIP	and it, that the information is 100 to 100 to	ship Clina days and the control of t	CITY-S			Li= Ob	Flatte Other				
indicated	ertify that the information supplied with to on this report or supplemental report is	true and accurate and that m	ıv signatu	re shall hav	e the s	same legal effect	as it made under	oath: that Lar	n an officer	or director	
of the cor	poration or the receiver or trustee empoy or on an attachment with an address, w	wered to execute this report a	as require	eo by Chapt	ter 607	, Florida Statutes	; and that my nam	e appears in	Rlock 10 o	r Block 11 if	
CICNAT	upe. N/ XX	TS	D.	Λſ	2/0	6 103	004/5				
SIGNAT	SIGNATURE AND TYPED OR PR	RINTED NAME OF SIGNING OFFICER C		ж ж	5 / U	0/0/	904/241-	-1-501 _{Da}	ytime Phone #		