## 2008 FOR PROFIT CORPORATION

## FILED **ANNUAL REPORT** Mar 10, 2008 08:00 A **DOCUMENT # P95000094950** Secretary of State FISHIN STUFF ENTERPRISES, INC. Principal Place of Business Mailing Address 12105 SOUTHEAST HIGHWAY 441 12105 SE HWY 441 BELLEVIEW, FL 34420 BELLEVIEW, FL\* 34420 02142008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3349995 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOGAN, THOMAS S JR. DO-NOT-WRITE- ~ 20 SOUTH BROAD STREET BROOKSVILLE, FL 34601 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signisture required when remittating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Added to Fees Trust Fund Contribution. .U00000853220 A.). After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS .10. TITLE FIELDHOUSE, JOHN R NAME STREET ADDRESS 25642 HAYMAN ROAD CITY-ST-ZIP BROOKSVILLE, FL 34602 TITLE FIELD HOUSE, MARY B. NAME STREET ADDRESS 25642 HAYMAN RD CITY-ST-ZIP BROOKSVILLE, FL

## DO NOT WRITE IN THIS SPACE

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 a with all other like empowered.

SIGNATURE:

TITLE

MALE STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

AMICK, SHEILA D

25642 HAYMAN RD

BROOKSVILLE, FL

TIELD HOUSS.