## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 14, 2008 08:00 All Secretary of State **DOCUMENT # P96000025236** YELLOW DOG EATS, INC. Principal Place of Business Mailing Address 1236 HEMPEL AVE 1348 FAIRVIEW ST WINDMERE, FL 34786 ORLANDO, FL 32804 01112008 No Chq-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3388612 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MORGAN, KATHRYN LEE DO NOT WRITE 149 BEACH AVENUE IN THIS SPACE ATLANTIC BEACH, FL 32233 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. .9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 .-0 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME MORGAN, KATHRYN LEE 149 BEACH AVENUE STREET ADDRESS ATLANTIC BEACH, FL 32233 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP

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.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO.

Cathryn Lee Morgan

4-11-08

**FILED** 

Daytime Phone #