# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 18, 2008**
**Secretary of State**

DOCUMENT# P96000039940

**Entity Name:** YEOMANS BROTHERS, INC.

**Current Principal Place of Business:**

6749 GARLAND ST.
FT. MYERS, FL 33912

**New Principal Place of Business:**

6749 GARLAND ST.
FT. MYERS, FL 33966

**Current Mailing Address:**

6749 GARLAND ST.
FT MYERS, FL 33912 US

**New Mailing Address:**

6749 GARLAND ST.
FT. MYERS, FL 33966

**FEI Number: 65-0650816** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

YEOMANS, GARY PRES
6749 GARLAND ST.
FT. MYERS, FL 33912 US

**Name and Address of New Registered Agent:**

YEOMANS, GARY PRES
6749 GARLAND ST.
FT. MYERS, FL 33966 US

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.

SIGNATURE: ______________________________ 04/18/2008
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: YEOMANS, GARY
Address: 6749 GARLAND ST.
City-St-Zip: FT. MYERS, FL 33912

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: YEOMANS, GARY
Address: 6749 GARLAND ST.
City-St-Zip: FT. MYERS, FL 33966

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY YEOMANS P 04/18/2008
Electronic Signature of Signing Officer or Director — Date