2008 FOR PROFIT CORPORATION

FILED Apr 21, 2008 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P96000049546 1. Entity Name PAMELLA S. LARSEN INC. Principal Place of Business Mailing Address 421 25TH ST NW 421 25TH ST NW NAPLES, FL 34120 NAPLES, FL 34120 04052008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0700986 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NICHOLS, JEFFREY DO NOT WRITE 421 25TH ST NW NAPLES, FL 33942 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 signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees U00000998817 10. OFFICERS AND DIRECTORS TITLE NAME NICHOLS, PAMELLA STREET ADDRESS 421 25TH ST NW CITY-ST-ZIP NAPLES, FL 341201839 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 on trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11/1/

FICER OR DIRECTOR

SIGNATURE