

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000055843

Entity Name: F.S. O/P ENTERPRISES, INC.

FILED  
Jan 08, 2008  
Secretary of State

## Current Principal Place of Business:

950 SOUTH BLANDING BLVD  
SUITE 24  
ORANGE PARK, FL 32065

## New Principal Place of Business:

## Current Mailing Address:

950 SOUTH BLANDING BLVD  
SUITE 24  
ORANGE PARK, FL 32065

## New Mailing Address:

FEI Number: 59-3385985

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, HAROLD O  
950 S BLANDING BLVD  
STE 24  
ORANGE PARK, FL 32065 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: JOHNSON, HAROLD O  
Address: 1798 LAKEDGE DR  
City-St-Zip: MIDDLEBURG, FL 32068

Title: D ( ) Delete  
Name: ROSSANO, JEAN A  
Address: 3381 EXCALIBURY WAY  
City-St-Zip: JACKSONVILLE, FL 32223

Title: DVS ( ) Delete  
Name: ROSSANO, ELEANOR E  
Address: 1798 LAKEDGE DR  
City-St-Zip: MIDDLEBURG, FL 32068

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVS (X) Change ( ) Addition  
Name: ROSSANO, ELEANOR E  
Address: 390 A1A BEACH BLVD UNIT 57  
City-St-Zip: ST. AUGUSTINE BEACH, FL 32080

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: HAROLD O JOHNSON

PRES

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date