

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 01, 2008 8:00 am Secretary of State

04-01-2008 90011 038 \*\*\*150.00

DOCUMENT # P96000063378
1. Entity Name
PENICK ENTERPRISES, INC.



Principal Place of Business
4036 S MARK DR
SARASOTA, FL 34232
Mailing Address
4036 S MARK DR
SARASOTA, FL 34232

4000000



01222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0684547
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SOBERING, NICHOLAS
4036 S MARK DRIVE
SARASOTA, FL 34232

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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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: DPS
NAME: SOBERING, PENELOPE R
STREET ADDRESS: 3638 AMESBURY LANE
CITY-ST-ZIP: SARASOTA, FL 34232

TITLE: DV
NAME: SOBERING, NICHOLAS G
STREET ADDRESS: 4036 S MARK DR
CITY-ST-ZIP: SARASOTA, FL 34232

TITLE: DT
NAME: SOBERING, STEPHEN
STREET ADDRESS: 4000 S MARK DR 2753 MARTIN ST.
CITY-ST-ZIP: SARASOTA, FL 34232 34237-6303

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

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

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

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 an address, with all other lists empowered.

SIGNATURE: Penelope Sobering Penelope Sobering Date 25/MARCH 08 941-920-1515