FILED May 07, 2008 8:00 am Secretary of State 05-07-2008 90104 033 ***158.75

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000100927 1. Entity Name BALLANTINE, INC.)J1U			
Principal Place of Business Mailing Address										
16520-26 SOUTH TAMIAMI TRAIL 16520-26 SOUTH TAMIAMI TR FORT MYERS, FL 33908 FORT MYERS, FL 33908					AIL		Z A lania anih esim esim esim			IT) 11 5 1
2. Principal P	lace of Busine	ss - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04222008	Chg-P	CR2E03	4 (12/06)	3.2 e
City & State			City & State		4. FEI Numb 65-071	-		 	Applicable	
Zip	Country		Zip Coun		itry	5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name					
16520-26	NE, RICHA SOUTH TA ERS, FL 33	MIAMI TRAIL	Street Address			P.O. Box Numb	er is Not Acceptable)		
					City		<u> </u>	FL	Zip Code	,
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										
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees										
10.		OFFICERS AND D		ADDITIONS	/CHANGES TO OFF	CERS AND	DIRECTORS	S IN 11		
TITLE	D	W. C. (740)	Delete TITU		_				Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	16520-26 S	NE, ELIZABETH A SOUTH TAMIAMI TRAIL ERS, FL 33908	•	STR	EET ADORESS '-ST-ZIP					
TITLE	T		Delete	TITL					☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	16520-26 9	NE, ELIZABETH ANN SOUTH TAMIAMI TRAIL ERS, FL 33908	•		eet address '- St-Zip					
TITLE	V	☐ Delete	TITL.	- 1				Change	Addition	
NAME Street Address City-St-Zip	16520-26 S	NE, RICHARD J JR SOUTH TAMIAMI TRAIL ERS, FL 33908	-		GE EET ADORESS 7-ST-ZIP	~-				
TITLE	S	NE LICAT	☐ Delete	TITL	j				Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		NE, LISA P SOUTH TAMIAMI TRAII ERS, FL 33908	-	STR	RET ADORESS Y-ST-ZIP					
TITLE NAME			☐ Delete	TITL NAM					Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP				STR	EET AODRESS 7-ST-ZIP					
TITLE			Delete	TITL	l l				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				STR	EET ADORESS (-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Horida Statutes. I further certify that the information indicated on this report or supplemental report is frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director or the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Horida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactiment with an address with all other like empowered. SIGNATURE: SIGNATURE AND TYPE ON PRINTED NAME OF SIGNING OFFICER OR PRINTED NAME OF SIGNING OFF										

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I sent my form in last Week and Yound my check on floorwider my desk. Please check and see if it can be found. Sincerely aux Dallaritine