

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # P97000009125

1. Entity Name
PHILLIPS PROPERTIES, INC.



Principal Place of Business
**1217 AIRPORT RD
DESTIN, FL 32541**

Mailing Address
**1217 AIRPORT RD
DESTIN, FL 32541**



03262008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 62-1673521	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
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 _____

Signature (holder or authorized officer or director of the corporation)

(NOTE: Registered Agent signature required when re-registering)

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	P/D
NAME	ROE, BOBBI ANN
STREET ADDRESS	1713 GIANT SYCAMORE LANE
CITY-STATE-ZIP	BAKER, FL 32531

TITLE	CEOC
NAME	PHILLIPS, RUPERT E
STREET ADDRESS	1713 GIANT SYCAMORE LANE
CITY-STATE-ZIP	BAKER, FL 32531

TITLE	VP/D
NAME	PHILLIPS, REGAN E
STREET ADDRESS	1713 GIANT SYCAMORE LANE
CITY-STATE-ZIP	BAKER, FL 32531

TITLE	ST/D
NAME	PHILLIPS, SANDRA K
STREET ADDRESS	1713 GIANT SYCAMORE LANE
CITY-STATE-ZIP	BAKER, FL 32531

TITLE	VP/D
NAME	PHILLIPS, RYAN E
STREET ADDRESS	1713 GIANT SQ LN
CITY-STATE-ZIP	BAKER, FL 32531

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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05/01/08-80036-022 150.00

**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 supplement 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 like employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rupert E. Phillips **RUPERT E. PHILLIPS** 3/26/08

850-650-5201
Daytime Phone #