2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P97000036735

GOLDEN BISCUIT, INC.

FILED Mar 26, 2007 08:00 AM **Secretary of State**

Principal Place of Business

GOLDEN BISCUIT INC. 223 CANAL STREET

NEW SMYRNA BEACH, FL 32168

Mailing Address

GOLDEN BISCUIT INC. 223 CANAL STREET

NEW SMYRNA BEACH, FL 32168



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For Not Applicable 59-3444138 \$8.75 Additional

5. Certificate of Status Desired

No Chg-P

03092007

Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

LEUCHT, RICHARD C 223 CANAL STREET NEW SMYRNA BEACH, FL 32168			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, typed or printed name of registered agent and title if applicable (NOTE Registered			d Agont agnature required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing \$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		, , , , , , , , , , , , , , , , , , , ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST LEUCHT, RICHARD C 501 N. CAUSEWAY #306 NEW SMYRNA BEACH, FL 32168		e for the second	
TIFLE NAME STREET ADDRESS CITY-ST-ZIP			,	000000679306 04/03/07-80032-012 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

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 trusteg employered 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 attachmen

SIGNATURE: