2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000038206

Address:

12990 SE 53RD LANE

City-St-Zip: MORRISTON, FL 32668

Entity Name: CENTRAL FLORIDA OLITOOOR MALL INC

FILED Apr 25, 2007 Secretary of State

Entity Name: CENTRAL FLORIDA OUTDOOR MALL, INC.						
Current P	rincipal Place	of Business:	New Principal Place of Business:			
4121 NW 4 OCALA, F	44TH AVE. L 34482 US	3				
Current Mailing Address:			New Mailing Address:			
PO BOX 3 OCALA, F		5				
FEI Number: 59-3453611 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	l Address of C	Surrent Registered Agent:	Name and	Address of	New Registered Agent:	
GREENE, 4121 N W OCALA, F	44TH AVENUI					
	e named entity s e of Florida.	submits this statement for the po	urpose of changing i	ts registered	office or registered agent, or bo	th,
SIGNATU	RE:					
	Electror	ic Signature of Registered Age	nt		Date	_
Election Car	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () SEYLER, EDW 707 NE 25TH A OCALA, FL 34	VE	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	DST () GREENE, C RA P O BOX 188 FT MCCOY, FL		Title: Name: Address: City-St-Zip:	DST (X GREENE, C R P O BOX 1956 OCALA, FL 3-	3	
Title: Name: Address: City-St-Zip:	VPD () PAULEY, GARY P O BOX 3656 OCALA, FL 34		Title: Name: Address: City-St-Zip:	VPD (X PAULEY, GAR P O BOX 3656 OCALA, FL 3	3	
Title: Name: Address: City-St-Zip:	AS () GREENE, SUE P O BOX 188 FORT MC COY	Delete , FL 32134	Title: Name: Address: City-St-Zip:	AS (X GREENE, SUE P O BOX 1956 OCALA, FL 3	3	
Title: Name:	AS (X WEINGARTNEI	Delete R, PATRICIA	Title: Name:	() Change () Addition	

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.

Address: City-St-Zip:

SIGNATURE: C. RAY GREENE, III DST 04/25/2007