## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

## FILED Mar 08, 2007 08:00 AM Secretary of State

3/6/09 239 339 339 8

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			TE IVE! OIV!			_		uo, 2uu /	
16.4 WOODFORD AVE FT. MYERS, FL 33901  2. Principal Place of Business - No P.O. Box # 2. Missing Address   2014/2007   ChgP   CR26394 (12/05)    2. Suite, Ant. # 60.   Suite, Ant. # 60	1. Entity Name						Se	ecretary o	f State
16.4 WOODFORD AVE FT. MYERS, FL 33901  2. Principal Place of Business - No P.O. Box # 2. Missing Address   2014/2007   ChgP   CR26394 (12/05)    2. Suite, Ant. # 60.   Suite, Ant. # 60	Principal Plac	ce of Business		<u> </u>	1				
FT. MYERS, FL 33901  2. Principal Place of Business - No P.O. Box # 3. Misling Address  Suite, Act. #, etc.	, ,			F					
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Shart Register of Status Desired   \$3.75 Additional   \$3.75 Additional	City & Sta	le	City & State	City & State				<del></del>	· · · - · · · · · · · · · · · · · · · ·
SMYTHE, DEBBIE A 1643 WOODPORD AVE FT. MYERS, FL 33901  8. The above named entity submits this statement for the purpose of changing its registered Agent.  City FL Zip Code  City FL Zip Code  City FL Zip Code  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of type steered agent.  SIGNATURE  Planak foliate of Price and its part are plant and pl	Zip	Country	Zip	Country				□ \$8.75 Ac	dditional
Namo   Street Address (P.O. Box Number is Not Acceptable)   Street Address (P.O. Box Number is Not Acceptable)								Fee Requir	ed
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PT. MYERS, FL 33901  Cay FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered eigent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered spent.  SIGNATURE  SIGNATURE  PHILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  PMANE  SIRT JORESS  CITY-S1-2P  TITLE  OBeles  TITLE  MAKE  SIREE JORESS  CITY-S1-2P  TITLE  MAKE  SIREE JOR									
8. The above named entity submits this statement for the purpose of changing its registored office or registered agent, or both, in the State of Florida. I am familier with, and accept the obligations of gigstered agent.  Signature Signature, hybrid of PRRETrians of registered agent and the 1 accepts.  MOTE Registered Agent systems regulated when recessing.  PILE NOWILL FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.    Deele	· · · · · · · · · · · · · · · · · · ·				Street Address (P.O. Box Number is Not Acceptable)				
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