## 2007-FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 16, 2007 8:00 am Secretary of State DOCUMENT # P97000079213 04-16-2007 90037 015 \*\*\*150.00 HOMER G. CABLISH, JR., E.A., P.A. Principal Place of Business Mailing Address 4855 27TH ST., WEST 2403 63RD ST W **BRADENTON FL 34207 BRADENTON FL 34209** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 6501 17 Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) Biy & State City & State Applied For 4. FEI Number 65-0778679 Not Applicable Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CABLISH, HOMER G JR. 2403 69RD ST W 6501 17HH AUE.W. LIIZ BRADENTON FL 34209 Street Address (P.O. Box Number is Not Acceptable) City 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. Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete THE Change Addition CABLISH, HOMER G JR. NAME NAME -2403 03RD-ST-W 6501 17th AVE. W. LIIZ STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CITY-ST-7IP CITY-ST-7/P ☐ Delete ☐ Change TITLE TITLE ☐ Addition CABLISH, GENOLA S NAME NAME 2403 63RD ST W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34269** CHY-ST-ZIP CITY-ST ZIP HILLE ☐ Delete ☐ Change TITLE ☐ Addition HUBER, DECLAN E NAME NAME 7070 PROSPECT RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34243 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition CABLISH, III, HOMER G NAME 4855 27TH ST. W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34207** CHY-ST-ZIP CUTY-S1-7IP Delete HUE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP HILE ☐ Delete UHF Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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

**SIGNATURE** 

**FILED**