

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 15, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000038611

1. Entity Name
N & C ENTERPRISES, INC.



Principal Place of Business
**107 FRONT STREET #214
KEY WEST, FL 33041**

Mailing Address
**815 PEACOCK PLZ
KEY WEST, FL 33040**



05122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0876504	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GILMORE, CHARLES R
107 FRONT STREET #214
KEY WEST, FL 33041**

**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 Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. ...

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GILMORE, CHARLES R
STREET ADDRESS	107 FRONT STREET #214
CITY-ST-ZIP	KEY WEST, FL 33041
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/04/08-80043-025 150.00

**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 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 with an address, with all other like empowered.

SIGNATURE:

Charles R. Gilmore
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles R. Gilmore 5/12/08
Date

Daytime Phone #

305 292-7672