2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# P98000039238

Entity Name: CUSTOM PRO-FIT, INC.

Current Principal Place of Business:

5665 NORTH AIRPORT ROAD
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

P O BOX 11899
NAPLES, FL 34101

New Mailing Address:

FEI Number: 65-0863049 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEBRE, HAROLD J ESQ
4001 TAMIAMI TRAIL NORTH
SUITE 300
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LAYNE, RONNIE L
Address: 4201 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

Title: P ( ) Delete
Name: TAYLOR, ROBERT M
Address: 3505 GIN LANE
City-St-Zip: NAPLES, FL 34102

Title: V ( ) Delete
Name: NETTLES, RODNEY
Address: 1096 29TH AVENUE NORTH
City-St-Zip: NAPLES, FL 34103

Title: S ( ) Delete
Name: TAYLOR, SANDRA A
Address: 3505 GIN LANE
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: ROBERT M. TAYLOR P 04/23/2007

Electronic Signature of Signing Officer or Director — Date