2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000062854

1. Entity Name
EARL FLOYD ENTERPRISES INC

Principal Place of Business	Mailing Address
310 FLORA DRIVE	310 FLORA DRIVE
FLORAHOME, FL 32140	FLORAHOME, FL 32140

DO NOT WRITE IN THIS SPACE

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07172007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3524530	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

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6. Name and Address of Current Registered Agent

FLOYD, EARL
310 FLORA DRIVE
FLORAHOME, FL 32140

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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 _____   7-13-07

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 14, 2007

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.

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10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FLOYD, EARL
STREET ADDRESS	310 FLORA DRIVE
CITY-ST-ZIP	FLORAHOME, FL 32140

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: X _____   7-13-07   386-659-2616

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #