

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000073478

1. Entity Name
EZELL INVESTMENT CO.



Principal Place of Business
**86131 HOPPER LANE
YULEE, FL 32097**

Mailing Address
**PO BOX 563
YULEE, FL 32041**



02282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HOPPER, DEBORAH E
86131 HOPPER LANE
YULEE, FL 32097**

**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 renewing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
P
NAME
EZELL, BEATRICE C
STREET ADDRESS
88144 PEEPLS RD
CITY-ST-ZIP
YULEE, FL 32097

TITLE
S
NAME
EZELL, GERALD W
STREET ADDRESS
88118 RHOER LAW PL
CITY-ST-ZIP
YULEE, FL 32097

TITLE
T
NAME
HOPPER, DEBORAH D
STREET ADDRESS
88131 HOPPER LN
CITY-ST-ZIP
YULEE, FL 32097

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000857414
04/01/08-80003-008 150.00

**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:

Gerald W. Ezell
GERALD W. EZELL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-2008 (904) 225-9093

Date

Daytime Phone #