

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000083338

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: THE FARRELL GROUP, INC.

**Current Principal Place of Business:**

3442 NORTH CITRUS AVENUE  
CRYSTAL RIVER, FL 34428 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1436  
CRYSTAL RIVER, FL 34423 US

**New Mailing Address:**

FEI Number: 59-3554336      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FARRELL, WILLIAM LEE  
3442 NORTH CITRUS AVENUE  
PO BOX 1436  
CRYSTAL RIVER, FL 34423 US

**Name and Address of New Registered Agent:**

FARRELL, WILLIAM LEE  
3442 NORTH CITRUS AVENUE  
CRYSTAL RIVER, FL 34428 US

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

04/12/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FARRELL, WILLIAM L  
Address: P. O. BOX 1436  
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: S ( ) Delete  
Name: EASLEY, GAIL  
Address: P. O. BOX 1436  
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D ( ) Delete  
Name: LANGDON, DENISE  
Address: P. O. BOX 1436  
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D ( ) Delete  
Name: WEIL, JOHN  
Address: O. O. BOX 1436  
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D ( ) Delete  
Name: FARRELL, DAVID  
Address: P. O. BOX 1436  
City-St-Zip: CRYSTAL RIVER, FL 34423

**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:

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: V. GAIL EASLEY

Electronic Signature of Signing Officer or Director

S

04/12/2007

Date