

May 09, 2008 0  
Secretary of**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P98000088208

1. Entity Name

PHILENA CORPORATION



Principal Place of Business

2638 SE 19TH AVE  
CAPE CORAL, FL 33904

Mailing Address

1217 E. CAPE CORAL PKWY, SUITE 192  
CAPE CORAL, FL 33904

05052008

No Chg-P

CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0901513

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

WRIGHT, CHRISTINE F  
1105 CAPE CORAL PARKWAY EAST  
SUITE C  
CAPE CORAL, FL 33904**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 FeesIn accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GRAMSCH, EVA
STREET ADDRESS	2638 S.E. 19TH AVENUE
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	D
NAME	GRAMSCH, HANS-HERMANN
STREET ADDRESS	2638 S.E. 19TH AVENUE
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000950507  
06/03/08-80071-015 150.00**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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GRAMSCH

05-01-08

Date

Daytime Phone # \_\_\_\_\_