2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000103005

1. Entity Name

DENGEL-FEHR AND COMPANY, INC.



FILED Apr 06, 2007 08:00 All Secretary of State

Principal Place of Business

4740 OLD STONE RD SARASOTA, FL 34233 Mailing Address

4740 OLD STONE RD SARASOTA, FL 34233



DO NOT WRITE IN THIS SPACE

04042007 No Chg-P CR2E034 (11/05)

4. FEI Number
22-2677649

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DENGEL, WAYNE G 4740 OLD STONE RD SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the ptions of registered agent.	ourpose of changing its register	ed office or i	registered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.		if applicable. (NOTE: Registere	d Agent signatur	e required when reinstating)	DATE
	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	I		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DENGEL, WAYNE G 4740 OLD STONE RD SARASOTA, FL 34233				U000 <u>0</u> 06928 <u>3</u> 5
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP DENGEL, SUZANNE L 4740 OLD STONE ROAD SARASOTA, FL 34233				04/16/07-80015-025 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of 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 attad ment with an address, with all other like empowered.

SIGNATURE:

AME OF SIGNING OFFICER OR DIRECTOR

64-yor-67

941-266-8066

Daytime Phone #