



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # P99000000673 1. Entity Name GODFREY DESIGN & ADVERTISING INC.	
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Principal Place of Business 275 96TH AVE NORTH #7 SAINT PETERSBURG, FL 33702	Mailing Address 275 96TH AVE NORTH #7 SAINT PETERSBURG, FL 33702
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DO NOT WRITE IN THIS SPACE



01302008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0901378	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LANG, JOSEPH H
669 FIRST AVENUE NORTH
ST. PETERSBURG, FL**

**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

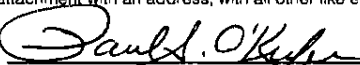
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GODFREY, GEOFFREY R 275 - 96TH AVE. N. #7 ST. PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS O'KEEFE, PAUL S 275 - 96TH AVE. N. #7 ST. PETERSBURG, FL 33702
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04/09/08-80037-019 158.75

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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:  **1/30/08** **727-579-1899**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #