## **2007 FOR PROFIT CORPORATION** ANNUAL REPORT

## Apr 02, 2007 8:00 am Secretary of State DOCUMENT # P99000033636 04-02-2007 90053 030 \*\*\*150.00 640 ISLAND DRIVE, INC. 40041920 Principal Place of Business Mailing Address 3540 FOREST HILL BLVD. 3540 FOREST HILL BLVD. SUITE 203 SUITE 203 WEST PALM BEACH, FL 33406 WEST PALM BEACH, FL 33406 incipal Place of Business - No P.O. Box # 11. Olean 03072007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 70 lo la<u>nd</u> 65-0912213 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 404 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAGGETT, DEBORAH D Street Address (P.O. Bex Number is Not Acceptable) 3540 FOREST HILL BLVD. **SUITE 203** WEST PALM BEACH, FL 33406 8. The above named entity submits this patement 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, 3123107 Signature, typect or printer (NOTE, Registered Agent signature required FILE NOWINGFEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. VP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HEATON, LINN NAME NAME STREET ADDRESS 3540 FOREST HILL BLVD. # 203 STREET ADDRESS WEST PALM BEACH, FL 33406 CITY-ST-7/P CITY-ST-7IP VΡ TITLE Delete TITLE ☐ Change ☐ Addition NAME HEATON, LEE NAME STREET ADDRESS 3540 FOREST HILL BLVD. # 203 STREET ADDRESS CITY-ST-ZiP WEST PALM BEACH, FL 33406 CITY-ST-ZIP VST TITLE ☐ Delete TITLE ☐ Change ☐ Addition BAGGETT, DEBORAH D NAME NAME STREET ADDRESS 3540 FOREST HILL BLVD. # 203 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33406 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition

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 twistee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter on a state the property with 40 of the file empowered. changed, or on an attachment with

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HEATON, GEORGE W

SINGER ISLAND, FL 33404

2655 NORTH OCEAN DRIVE SUITE 310

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**FILED**