


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 15, 2007 8:00 am**  
**Secretary of State**

05-15-2007 90009 044 \*\*\*150.00

<b>DOCUMENT # P99000043550</b>	
1. Entity Name PENTON'S INC.	

Principal Place of Business 4775CHUMUCKLAHIGHWAY PACE, FL 32571	Mailing Address 4775 CHUHUCKLA HIGHWAY PACE, FL 32571
---	---

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  JONES, ANGELA J 6460 JUSTICE AVE. MILTON, FL 32570	<b>DO NOT WRITE IN THIS SPACE</b>
---	---------------------------------------

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 W. L. Penton Sr. DATE April 27, 2007

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST PENTON, WINFRED L SR. 4775 CHUMUCKLA HIGHWAY PACE, FL 32571
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WALKER, JEFFREY S 4775CHUMUCKLA HIGHWAY PACE, FL 32571 <i>Delete</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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: Winfred L. Penton Sr. DATE 4/27/07 (850-3915-9800)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR