

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000046202

Entity Name: CENTENNIAL PRODUCTS, INC.

FILED  
Feb 27, 2007  
Secretary of State

## Current Principal Place of Business:

6900 PHILLIPS HIGHWAY  
STE 41  
JACKSONVILLE, FL 32216

## Current Mailing Address:

P O BOX 23905  
JACKSONVILLE, FL 32241

## New Principal Place of Business:

6900 PHILIPS HIGHWAY  
STE 45  
JACKSONVILLE, FL 32216

## New Mailing Address:

FEI Number: 59-3581775      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORD, JESTER, BOWLUS, DUSS & MORGAN, P.A.  
10110 SAN JOSE BLVD  
JACKSONVILLE, FL 32257      US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D      ( ) Delete  
Name: EVERSON, JANE MONTGOMEY  
Address: 3981 ENGLISH COLONY DR S.  
City-St-Zip: JACKSONVILLE, FL 32259

Title: PST      ( ) Delete  
Name: EVERSON, JANE M  
Address: 3921 ENGLISH COLONY DR S.  
City-St-Zip: JACKSONVILLE, FL 32257

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D      (X) Change ( ) Addition  
Name: EVERSON, JANE MONTGOMEY  
Address: 3981 ENGLISH COLONY DR S.  
City-St-Zip: JACKSONVILLE, FL 32257

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANE M EVERSON

DPST

02/27/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date