

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000050502

FILED
Jan 04, 2008
Secretary of State

Entity Name: CHECK MAN, INC.

Current Principal Place of Business:

121 W CLARK ST
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2129
QUINCY, FL 32353

New Mailing Address:

FEI Number: 59-3579397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHMOND, HAROLD S
227 E JEFFERSON ST
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

WILLIAMS, PAUL WADE
121 W CLARK ST
QUINCY, FL 32351 US

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: PAUL WADE WILLIAMS

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: WILLIAMS, TAYLOR B
Address: P.O. BOX 1018
City-St-Zip: QUINCY, FL 32353

Title: D () Delete
Name: WILLIAMS, PAUL G
Address: P.O. BOX 2129
City-St-Zip: QUINCY, FL 32353

Title: P () Delete
Name: WILLIAMS, PAUL W
Address: P.O. BOX 863
City-St-Zip: QUINCY, FL 32353

Title: D () Delete
Name: GRANT, B.D.
Address: P.O. BOX 2129
City-St-Zip: QUINCY, FL 32353

Title: D () Delete
Name: MAXWELL, WILLIAM
Address: P.O. BOX 2129
City-St-Zip: QUINCY, FL 32353

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: PAUL WADE WILLIAMS

P

01/04/2008

Electronic Signature of Signing Officer or Director

Date