



FILED
Feb 05, 2007 08:00 AM
Secretary of State

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000052050			
1. Entity Name GENEVA HOLDINGS INC.			
Principal Place of Business 1836 GRINNELL TERRACE. WINTER PARK, FL 32789	Mailing Address 1836 GRINNELL TERRACE. WINTER PARK, FL 32789		
DO NOT WRITE IN THIS SPACE			
		01282007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-3580439	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			
HEYWORTH-DAVIS, SIMON J 1836 GRINNELL TERRACE WINTER PARK, FL 32789		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 _____ (NOTE: Registered Agent signature required when reconstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS HEYWORTH-DAVIS, SIMON J 2600 WESTERN PARKWAY ORLANDO, FL 32803		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARK, F. GORDEN 3875 INDIAN RIVER DR. COCOA, FL 32922		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, WILLIAM 2229 BUTLER BAY DR. N. WINDERMERE, FL 34786		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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: _____		Feb 1 st 07 407 539 5770	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	