2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P99000064470							ILED 16 AM 10: 09		
Principal Place of Business Mailing Address						CECOUTY.	TO AM IO: US		
413 CLEVELAND ST 413 CLEVELAND ST CLEARWATER, FL 33755 US CLEARWATER, FL 3375			55 US			TALL AHAS	RY OF STATE SSEE, FLORIDA		
GEELINATE SOLOS					 10 3 0 1)	PSEE, FLORIDA		
Principal Place of Business - No P.O. Box # 3. Mailing Address									
Suite. Apt. #, etc. Suite. Apt. #, e		Suite, Apt, #, etc.							
					07062007	Chg-P	CR2E034 (12/06)		
City & State		City & State			4. FEI Numb 59-358		<u> </u>	oplied For of Applicable	
Zip Country		Zip Country			5. Certificate of Status Desired See Required Fee Required				
6. Name and Address of Current Registered Age				ļ	7. Name and	Address of New R			
 KERR, DAVID L				Name BAVID L. KERR					
300 N. OSCEOLA AVENUE			Street A	Street Address (P.O. Box Number is Not Acceptable)					
APT. 5-C CLEARWA	ATER, FL 33755		V		<u> </u>				
City CI FARIIIATER FL ZigCode > Co								le > C5	
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 Separative, typed or printed native of inquisitered agent and title if inholicable (I/OTE: Represented Agent signature required when representing) DATE DATE									
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND		11,		ADDITIONS	CHANGES TO OFF	FICERS AND DIRECTOR		
NAME	P KERR, DAVID L	☐ Delete	HTLE NAME			:0010s	Change ☐○도무미의	Addition	
STREET ADDRESS					977	19/070109	56002 **61	.25	
MILE	VP VP	☐ Delete	CHY-ST-ZIF THILE		VPD		⊠ Change	Addition	
NAME SUPERI ADDRESS	KERN, ANDREA		NAME CLOSEL ADDRESS	K	RR,	ANDRE	AH		
STREET ADDRESS CITY-ST-ZIP	413 CLEVELAND ST CLEARWATER, FL 33755		STREET ADDRESS CITY-ST-ZIP	1 4	ZI ZAK	IVA	NA FL 3	7555	
TITLE	T CONTRACTOR OF CONTRACTOR	☐ Delete	TITLE	V AV	G-V=00-	TANNER, CR	Change	Addition	
NAME STREET ADDRESS	KERR-TANNER, CRYSTAL 413 CLEVELAND ST		NAME STREET ADDRESS	ייים	C-NC#A	HANGE IC CE	tsine v.		
CITY-ST-ZIP	CLEARWATER, FL 33755		CITY+ST ZIF	-			F1 01		
UTLE NAME	VPD KERR, ROXANNE P	☐ Delete	THILE NAME				Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	413 CLEVELAND ST CLEARWATER, FL 33755		STREET ADORESS CITY ST-ZIP	-					
HILE	CLEARWATER, PE 33733	☐ Delete	TITLE	V	PD		☐ Change	Addition	
NAME			NAME CAREEL ADDRESS	/	4057	IN 14	EAR		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	;	413 CLUSA	CLEVE LUNT	ERFL	3 255	
UILE	7	Detete	TOTE		<u> </u>		☐ Change	Addition	
NAME STREET ADDRESS	$\square \cap \square$	10	NAME STREET ADDRESS						
CHY ST-ZIP	151116	101	CITY-S1-ZIP	<u></u>		o 50 14 60 1 1			
12. Thereby certify that the information subplied with this filling 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:									
<u>-</u>	1/1/10	with all other like ampowered	in			Syrk	57		