

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # P99000073193

1. Entity Name  
SHOP & STORE, INC.



Principal Place of Business  
222 WEST COMSTOCK AVE., STE. 101  
WINTER PARK, FL 32789

Mailing Address  
222 WEST COMSTOCK AVE., STE. 101  
WINTER PARK, FL 32789



01032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3597939

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

GODBOLD, GENE H  
222 WEST COMSTOCK AVE., STE. 101  
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD URRY, STEWART ASHLEY CHASE HOUSE ABBOTSBURY DORSET DT3 4JZ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D URRY, PATRICIA M ASHLEY CHASE HOUSE ABBOTSBURY DORSET DT3 4JZ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GODBOLD, GENE H 222 WEST COMSTOCK AVENUE, SUITE 101 WINTER PARK, FL 32789
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: *Gene H Godbold*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-07

Date

407-647-4418

Daytime Phone #