

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 17, 2007 8:00 am
Secretary of State

07-17-2007 90108 015 ***150.00

DOCUMENT # P99000083393

1. Entity Name
THE HOUSE OF MOCCASINS, INC.



Principal Place of Business
**1755 1ST ST E
BRADENTON, FL 34208**

Mailing Address
**6201 37TH AVE W.
BRADENTON, FL 34209**

40125638



07032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0946721

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MACDONALD, MARIA G
6201 37TH AVE W
BRADENTON, FL 34209**

**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 \$550.00
Due by September 14, 2007**

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
**PSTD
MACDONALD, MARIA G
6201 37TH AVE W
BRADENTON, FL 34209**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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NAME
STREET ADDRESS
CITY ST ZIP

*No.
Prior
Notice*

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:

Maria G MacDonald

July 9/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #