

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000087311

Entity Name: GENE POWELL, INC.

FILED  
Sep 13, 2007  
Secretary of State

## Current Principal Place of Business:

2195 HARLOCK RD  
MELBOURNE, FL 32934

## New Principal Place of Business:

## Current Mailing Address:

2195 HARLOCK RD  
MELBOURNE, FL 32934

## New Mailing Address:

FEI Number: 59-3603128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POWELL, GENE  
2195 HARLOCK RD  
MELBOURNE, FL 32934 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: POWELL, GENE JR  
Address: 2195 HARLOCK RD  
City-St-Zip: MELBOURNE, FL 32934

Title: V (X) Delete  
Name: YOST, KIRK  
Address: 791 UNIVERSAL ST NW  
City-St-Zip: PALM BAY, FL 32907

Title: 2V (X) Delete  
Name: PARKHURST, JOHN JR  
Address: 2033 LITTLE JOHN ROAD  
City-St-Zip: MELBOURNE, FL 32935

## 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:

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: GENE POWELL

DPST

09/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date