

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097370

FILED
Mar 27, 2007
Secretary of State

Entity Name: 12420 SUMMERPORT BEACH, INC.

Current Principal Place of Business:

PO BOX 8361
TAMPA, FL 336748361

New Principal Place of Business:

106 WEST STANLEY ST.
TAMPA, FL 33604

Current Mailing Address:

PO BOX 8361
TAMPA, FL 336748361

New Mailing Address:

FEI Number: 59-3611954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, WILLIAM A
106 WEST STANLEY STREET
TAMPA, FL 33604 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GORDY, SUSAN B
Address: 1135 OVERBROOK DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: HOLSON, BRENDA B
Address: 846 LAKE HOWELL ROAD
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: BROWN, WILLIAM A
Address: PO BOX 9127
City-St-Zip: TAMPA, FL 33674

Title: D () Delete
Name: BROWN, THOMAS H
Address: PO BOX 1300
City-St-Zip: EUTIS, FL 327271300

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM A. BROWN

D

03/27/2007

Electronic Signature of Signing Officer or Director

Date