

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P99000101580

Entity Name: START PACKIN' REALTY INC.

**FILED**  
**Jun 25, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

201B ESCAMBIA ST  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

622 11TH STREET NORTH  
JACKSONVILLE BEACH, FL 322503572 US

**Current Mailing Address:**

622 11TH ST. N.  
JACKSONVILLE BEACH, FL 322503572

**New Mailing Address:**

622 11TH STREET NORTH  
JACKSONVILLE BEACH, FL 322503572 US

FEI Number: 59-3610084

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

O'NEILL, KAREN B  
1009 21ST N  
JACKSONVILLE BEACH, FL 32250 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

**OFFICERS AND DIRECTORS:**

Title: DPV ( ) Delete  
Name: COLLINS, WILLIAMS A  
Address: 622 11TH ST N  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DST ( ) Delete  
Name: COLLINS, BRENDA  
Address: 622 11TH ST N  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPV (X) Change ( ) Addition  
Name: COLLINS, WILLIAM A  
Address: 622 11TH STREET NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 322503572 US

Title: DST (X) Change ( ) Addition  
Name: COLLINS, BRENDA  
Address: 622 11TH STREET NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 322503572 US

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: WILLIAM A. COLLINS

DPV

06/25/2007

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

\_\_\_\_\_  
Date