## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S80686

Entity Name: PILINKO ENTERPRISES, INC.

FILED Aug 30, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1771 STATE RD. 13 2695 FOXHUNT TRAIL JACKSONVILLE, FL 32259 SAINT JOHNS, FL 32259

**Current Mailing Address: New Mailing Address:** 

2695 FOX HUNT TRAIL 2695 FOXHUNT TRAIL JACKSONVILLE, FL 32259 SAINT JOHNS, FL 32259

FEI Number: 59-3086246 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PILINKO, TERRANCE S. PILINKO, TERRANCE S. 2695 FOX HUNT TRAIL 2695 FOX HUNT TRAIL JACKSONVILLE, FL 32259 US SAINT JOHNS, FL 32259 US

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: TERRANCE S. PILINKO 08/30/2007

> 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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition PILINKO, TERRANCE S., PILINKO, TERRANCE S., Name: Name: 2659 FOX HUNT TR. 2659 FOX HUNT TR. Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: SAINT JOHNS, FL 32259

Title: (X) Delete Title: () Change () Addition

Name: PILINKO, TERRANCE S., Name: 2659 FOX HUNT TR. Address: Address: JACKSONVILLE, FL City-St-Zip: 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: TERRANCE S. PILINKO **OFFI** 08/30/2007