

2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 16, 2007 8:00 am**  
**Secretary of State**

04-16-2007 90326 045 \*\*\*150.00

**DOCUMENT # S84473**

1. Entity Name  
DEBARY BUSINESS GROUP, INC.



Principal Place of Business

101 HIGHWAY 17-92  
DEBARY, FL 32713

Mailing Address

~~101 HIGHWAY 17-92~~  
DEBARY, FL 32713

9 Colomiza Road

40063100



01072007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3089519

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

HOLLY, JOSHUA  
303 RIVIERA DRIVE  
DEBARY, FL 32713

**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 \$150.00**  
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D  
NAME HOLLY, DOUGLAS  
STREET ADDRESS 101 HIGHWAY 17-92  
CITY-ST-ZIP DEBARY, FL

TITLE D  
NAME HOLLY, ROSE  
STREET ADDRESS 101 HIGHWAY 17-92  
CITY-ST-ZIP DEBARY, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Rose Marie Holly, Secretary*  
ROSEMARIE HOLLY  
SECRETARY

4-11-07

Date

386-668-5230

Daytime Phone #