

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S89432

Entity Name: YOUMANS & FORD, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

4310 S. HOPKINS AVE
TITUSVILLE, FL 32780 US

New Principal Place of Business:

6785 ACKERMAN AVE
COCOA, FL 32927 US

Current Mailing Address:

POST OFFICE BOX 5857
TITUSVILLE, FL 327835857 US

New Mailing Address:

PO BOX 849
SHARPES, FL 329590849 US

FEI Number: 59-3088201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, ANN M. & FRANCES B. YOUMANS
4310 S. HOPKINS AVE.
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

FORD, ANN M
6785 ACKERMAN AVE
COCOA, FL 32927 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: ANN M FORD

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FORD, ANN M.,
Address: 6785 ACKERMAN AVE.
City-St-Zip: COCOA, FL

Title: D () Delete
Name: YOUMANS, FRANCES B.,
Address: 5075 CARTER ST.
City-St-Zip: COCOA, FL

Title: D () Delete
Name: FORD, THOMAS M.,
Address: 6785 ACKERMAN AVE.
City-St-Zip: COCOA, FL

Title: D () Delete
Name: YOUMANS, RONALD H.,
Address: 5075 CARTER ST.
City-St-Zip: COCOA, FL

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 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: ANN M FORD

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date