

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V38354

FILED
Apr 17, 2007
Secretary of State

Entity Name: OBY C. PEADEN & ASSOCIATES, INC.

Current Principal Place of Business:

4550 FOREST BREEZE COURT
PACE, FL 32571 US

New Principal Place of Business:

Current Mailing Address:

4550 FOREST BREEZE COURT
PACE, FL 32571 US

New Mailing Address:

FEI Number: 59-3118824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRAIN, JR. O
10555 GOODRANGE DR.
MILTON, FL 325838202 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 (X) Delete
Name: PEADEN, OBY C.,
Address: 4563 JERNIGAN RD.
City-St-Zip: MILTON, FL

Title: D (X) Delete
Name: PEADEN, LILLIE,
Address: 4563 JERNIGAN RD.
City-St-Zip: MILTON, FL

Title: DPT () Delete
Name: PEADEN, KEVIN P.,
Address: 4550 FOREST BREEZE CT
City-St-Zip: PACE, FL 32571

Title: DVS () Delete
Name: PEADEN, MATTHEW B.,
Address: 4380 CAMEO DRIVE
City-St-Zip: PACE, FL 32571

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DTP (X) Change () Addition
Name: PEADEN, KEVIN P.,
Address: 4550 FOREST BREEZE CT
City-St-Zip: PACE, FL 32571

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

Title: ASSS () Change (X) Addition
Name: OBIE CRAIN, JR.,
Address: 10555 GOODRANGE DRIVE
City-St-Zip: MILTON, FL 32583-820 SR

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: OBIE CRAIN, JR.

ASSS

04/17/2007

Electronic Signature of Signing Officer or Director

Date