


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # V45953	
1. Entity Name MULDER & EASTRIDGE ECONOMISTS, INC.	

Principal Place of Business 4613 W. NORTH A STREET TAMPA, FL 33609 US	Mailing Address 4613 W. NORTH A STREET TAMPA, FL 33609 US
---	---

DO NOT WRITE IN THIS SPACE



04112008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3129167	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MULDER, BRENDA B 4613 W. NORTH A STREET TAMPA, FL 33609	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. N/A SIGNATURE <u><i>Brenda Mulder</i></u> Brenda Mulder DATE <u>4-14-08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	

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. N/A SIGNATURE <u><i>Brenda Mulder</i></u> Brenda Mulder DATE <u>4-14-08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>
--

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000902723 04/30/08-80017-013 150.00
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MULDER, BRENDA B 4613 W. NORTH A ST. TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EASTRIDGE, JOYCE H 4613 W. NORTH A STREET TAMPA, FL 33609
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: <u><i>Brenda Mulder</i></u> Brenda Mulder DATE <u>4-14-08</u> DAYTIME PHONE # <u>(813) 286-1997</u>	