2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008
Secretary of State

DOCUMENT# P01000105915

Entity Name: SNOWCAP PRODUCTS, INC.

Current Principal Place of Business:

372 SW SUDAY GLN.
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

PO BOX 3175
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 59-3746997 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HADDOX, BOBBIE E
372 SW SUNDAY GLN.
LAKE CITY, FL 32024 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: PTD ( ) Delete
Name: HADDOX, MARK
Address: 372 SW SUNDAY GLN.
City-St-Zip: LAKE CITY, FL 32024

Title: VPSD ( ) Delete
Name: HADDOX, BOBBIE
Address: 372 SW SUNDAY GLN.
City-St-Zip: LAKE CITY, FL 32024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BOBBIE HADDOX V.P 01/31/2008

Electronic Signature of Signing Officer or Director — Date