

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108558

Entity Name: SPECIALTY PEOPLE, INC.

FILED
Feb 26, 2008
Secretary of State

Current Principal Place of Business:

4077 ORIENT DRIVE
HERNANDO BEACH, NC 34607

New Principal Place of Business:

4077 ORIENT DRIVE
HERNANDO BEACH, FL 34607

Current Mailing Address:

PO BOX 7898
WILMINGTON, NC 28406

New Mailing Address:

FEI Number: 56-2185613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALITY BOOKKEEPING SERVICES, INC.
4000 OLEANDER DRIVE
SUITE 2B
WILMINGTON, NC, FL 28403 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: PRES () Delete
Name: LAWSON, STEPHEN J
Address: 4077 ORIENT DRIVE
City-St-Zip: HERNANDO BEACH, FL 34607

Title: SEC () Delete
Name: LAWSON, TRACY D
Address: 4077 ORIENT DRIVE
City-St-Zip: HERNANDO BEACH, FL 34607

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: STEPHEN J LAWSON

PRES

02/26/2008

Electronic Signature of Signing Officer or Director

_____ Date