# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 25, 2008**
**Secretary of State**

DOCUMENT# P02000083002

**Entity Name:** BELL SHOALS PROPERTIES, INC.

**Current Principal Place of Business:**

3350 BELL SHOALS RD
BRANDON, FL 335117637

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6302
BRANDON, FL 335086005

**New Mailing Address:**

**FEI Number: 22-3861769** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURLEY, B MITCHELL
2240 LITHIA CENTER LN
VALRICO, FL 33594 US

**Name and Address of New Registered Agent:**

BURLEY, B MITCHELL
638 E. BLOOMINGDALE AVE.
BRANDON, FL 33511 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: _____ 03/25/2008
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: REED, DAVID D
Address: 120 WOOD DALE DR
City-St-Zip: BRANDON, FL 33511

Title: TD ( ) Delete
Name: BURLEY, ROSEMARIE F
Address: 106 LOCUST DR
City-St-Zip: BRANDON, FL 33511

Title: VPD ( ) Delete
Name: REED, LISA M
Address: 120 WOOD DALE DR
City-St-Zip: BRANDON, FL 33511

Title: SD ( ) Delete
Name: BURLEY, B MITCHELL
Address: 106 LOCUST DR
City-St-Zip: BRANDON, FL 33511

**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: DAVID D. REED PD 03/25/2008
Electronic Signature of Signing Officer or Director — Date