

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000084454

Entity Name: SPECIAL ACQUISITIONS HOLDINGS, INC.**Current Principal Place of Business:**6435 NAPLES BOULEVARD
NAPLES, FL 34109**Current Mailing Address:**6435 NAPLES BOULEVARD
NAPLES, FL 34109**FEI Number:** 32-0296173**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title VP
Name FOSTER, RANDY
Address 215 S. PINE ST.
City-State-Zip: SPARTANBURG SC 29302

Title SECRETARY
Name LICHTENBERGER, VINCENT M
Address 4725 PIEDMONT ROW DR.
City-State-Zip: CHARLOTTE NC 28210

Title VP
Name PARRELLA, FRANK
Address 6435 NAPLES BLVD
City-State-Zip: NAPLES FL 34109

Title TREASURER
Name MARSHALL, CHRISTOPHER
Address 4725 PIEDMONT ROW DR.
110
City-State-Zip: CHARLOTTE NC 28210

Title PRESIDENT
Name BARRIER, JOEL
Address 333 FAYETTEVILLE ST.
ST.1490
City-State-Zip: RALEIGH NC 27601

Title ASST. SECRETARY
Name DELLINGER, KIM R
Address 4725 PIEDMONT ROW DR.
City-State-Zip: CHARLOTTE NC 28210

Title VP
Name DENNY, ROGER
Address 325 W. JOULE ST.
City-State-Zip: ALCOA TN 37701

I hereby 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 all other like empowered.

SIGNATURE: KIM DELLINGER

ASST. SEC.

02/17/2017

Electronic Signature of Signing Officer/Director Detail_____
Date