2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 27, 2007
Secretary of State

DOCUMENT# 396647

Entity Name: SPS COMMERCIAL CENTER, INC.

Current Principal Place of Business:

ROUTE 707, RIO
P.O. BOX 67
STUART, FL 349950067

New Principal Place of Business:

ROUTE 707, RIO
657 NE DIXIE HWY
JENSEN BEACH, FL 34957

Current Mailing Address:

P.O. BOX 67
STUART, FL 349950067

New Mailing Address:

FEI Number: 59-1462365 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TIMON, L.J.
657 NE DIXIE HIGHWAY
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

TIMON, GAY
657 NE DIXIE HIGHWAY
JENSEN BEACH, FL 34957 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: GAY TIMON 06/27/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TIMON, L. J.,
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL

Title: VSD ( ) Delete
Name: TIMON, GAY,
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL

Title: VD ( ) Delete
Name: SLATER, GROSE,
Address: 511 MANOR DRIVE
City-St-Zip: STUART, FL

Title: VD (X) Delete
Name: JOHNSTON, NANCY
Address: 1005 SUMNER AVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D (X) Delete
Name: CHERI, PAWLAK M
Address: 1005 SUMNER AVE
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TIMON, GAY
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: VPD (X) Change ( ) Addition
Name: JOHNSTON, ROY M
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: STD (X) Change ( ) Addition
Name: JOHNSTON, NANCY L
Address: 657 NE DIXIE HIGHWAY
City-St-Zip: JENSEN BEACH, FL 34957

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: GAY TIMON PD 06/27/2007
Electronic Signature of Signing Officer or Director Date