2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 433304

Entity Name: FAY POTTER UNDERFASHIONS, INC.

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Cullent Finicipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

184 CREPE MYRTLE DR C/O GEWIRTZ GROVELAND, FL 34736

Current Mailing Address: New Mailing Address:

184 CREPE MYRTLE DR
C/O GEWIRTZ
GROVELAND, FL 34736 US

184 CREPE MYRTLE DR
C/O GEWIRTZ
GROVELAND, FL 34736 US

184 CREPE MYRTLE DR
C/O GEWIRTZ
GROVELAND, FL 34736

FEI Number: 59-1487192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GEWIRTZ, ARNOLD 184 CREPE MYRTLE DR GROVELAND, FL 34736 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPTS () Delete Title: CPTS (X) Change () Addition GEWIRTZ, ARNOLD, GEWIRTZ, ARNOLD CPTS Name: Name: 184 CREPE MYRTLE DRIVE Address: 184 CREPE MYRTLE DRIVE Address: City-St-Zip: GROVELAND, FL 34736 City-St-Zip: GROVELAND, FL 34736

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: ARNOLD GEWIRTZ CPTS 03/12/2009