

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 06, 2007
Secretary of State

DOCUMENT# 708299

Entity Name: SHOWFOLKS OF SARASOTA, INC.**Current Principal Place of Business:**P O BOX 1476
SARASOTA, FL 342308476**New Principal Place of Business:**2381 FRUITVILLE RD
SARASOTA, FL 34237**Current Mailing Address:**2381 FRUITVILLE RD
SARASOTA, FL 34237**New Mailing Address:**P O BOX 1476
SARASOTA, FL 342308476**FEI Number:** 59-6178160**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PIOSON, JAZMYN
8827 PHYLISS AVE
SARASOTA, FL 34231 US**Name and Address of New Registered Agent:**PINSON, JAZMYN K
8827 PHYLISS AVE
SARASOTA, FL 34231 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: JAZMYN K. PINSON

08/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: ROSAIRE, DERICK
Address: PALMER DR
City-St-Zip: SARASOTA, FL 34232

Title: PD () Delete
Name: WALLEDA, JENNY
Address: 2708 DESOTA RD.
City-St-Zip: SARASOTA, FL 34234

Title: VTD () Delete
Name: WELLS, CINDY
Address: 7804 BARR RD
City-St-Zip: MYAKKA CITY, FL 34251

Title: VP () Delete
Name: WALLEDA, JENNY
Address: 2708 DESOTA RD.
City-St-Zip: SARASOTA, FL 34234

Title: SD (X) Delete
Name: BRAHIM, FATIMA
Address: 108 GOLDEN SANDS DR.
City-St-Zip: SARASOTA, FL 34237

Title: P (X) Delete
Name: WALLEDA, JENNY
Address: 2708 DESOTA RD
City-St-Zip: SARASOTA, FL 34234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: PINSON, JAZMYN K
Address: 8827 PHYLISS AVENUE
City-St-Zip: SARASOTA, FL 34231

Title: SC (X) Change () Addition
Name: MURILLO, MIRNA
Address: 2621 RIDGE AVENUE
City-St-Zip: SARASOTA, FL 34235

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAZMYN K PINSON

TR

08/06/2007

Electronic Signature of Signing Officer or Director

Date