



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 11, 2007 08:00 AM
Secretary of State**

DOCUMENT # F99000000991		
1. Entity Name SNOW CAP GLOBAL INVESTMENTS LIMITED, INC.		
Principal Place of Business 3945 HAMILTON CLUB CIR. SARASOTA, FL 34242 US		Mailing Address 3945 HAMILTON CLUB CIR. SARASOTA, FL 34242 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent DUMBAUGH, JOHN D 1900 RINGLING BLVD. SARASOTA, FL 34236		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		U000000582381 01/11/07-80029-013 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BELL, MICHAEL 1900 RINGLING BLVD. SARASOTA, FL 34236	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DUMBAUGH, BARBARA C 1900 RINGLING BLVD. SARASOTA, FL 34236	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STDV DUMBAUGH, JOHN D 1900 RINGLING BLVD. SARASOTA, FL 34236	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  v.p.		1-9-07 941-365-7171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #