

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G54359

FILED
Apr 05, 2007
Secretary of State

Entity Name: AMERICAN COED PAGEANTS, INC.

Current Principal Place of Business:

% MARY JO SCARBOROUGH
3695 WIMBLEDON DR.
PENSACOLA, FL 32504

New Principal Place of Business:

% CAROLYN HAWKINS
4120 PIEDMONT ROAD
PENSACOLA, FL 32503

Current Mailing Address:

% MARY JO SCARBOROUGH
3695 WIMBLEDON DR.
PENSACOLA, FL 32504

New Mailing Address:

% CAROLYN HAWKINS
4120 PIEDMONT ROAD
PENSACOLA, FL 32503

FEI Number: 59-2321438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCARBOROUGH, MARY JO
3695 WIMBLEDON DR.
PENSACOLA, FL 32504 US

Name and Address of New Registered Agent:

HAWKINS, CAROLYN C
4120 PIEDMONT ROAD
PENSACOLA, FL 32503 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: CAROLYN HAWKINS

04/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAWKINS, CAROLYN,
Address: 4120 PIEDMONT RD.
City-St-Zip: PENSACOLA, FL 32503

Title: VS () Delete
Name: SCARBOROUGH, MARY JO,
Address: 3695 WIMBLEDON DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: ST () Delete
Name: SCARBOROUGH, GEORGE F
Address: 3695 WIMBLEDON DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAWKINS, CAROLYN C
Address: 4120 PIEDMONT RD.
City-St-Zip: PENSACOLA, FL 32503

Title: VS (X) Change () Addition
Name: SCARBOROUGH, MARY JO
Address: 3695 WIMBLEDON DRIVE
City-St-Zip: PENSACOLA, FL 32504

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

Title: DR () Change (X) Addition
Name: HAWKINS, CAROLYN P
Address: 4120 PIEDMONT ROAD
City-St-Zip: PENSACOLA, FL 32503

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROLYN P HAWKINS

DR

04/05/2007

Electronic Signature of Signing Officer or Director

Date