2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M94850

FILED Jan 13, 2008 Secretary of State

Entity Name: VIDEO CITY OF HIGH SPRINGS INC

Current P	rincipal Place	of Bu	siness:		New Prince	ipal Place	e of Business:		
	/ 244TH STREI	ΕT							
UNIT 30 HIGH SPF	RINGS, FL 326	43	US						
Current M	lailing Addres	s:			New Maili	ng Addre	ss:		
	. US HWY 441 RINGS, FL 326	43	US						
FEI Number	: 59-2946888	FELL	Number Applied F	or() FEI	Number Not App	licable ()	Certificate of Status Desir	ed()	
Name and Address of Current Registered Agent:					Name and	Name and Address of New Registered Agent:			
NAA OLZININI	ON OFOROE	_							
18585 SO HIGH SPF The above	ON, GEORGE UTH HWY 441 RINGS, FL 326 named entity se of Florida.	43	US s this statement	for the purpos	se of changing i	ts register	ed office or registered agent	, or both,	
18585 SO HIGH SPF The above	UTH HWY 441 RINGS, FL 326 a named entity s e of Florida.	43		for the purpos	se of changing i	ts register	ed office or registered agent	, or both,	
18585 SO HIGH SPF The above in the Stat	UTH HWY 441 RINGS, FL 326 named entity s e of Florida. RE:	43 submit			se of changing i	ts register	ed office or registered agent Date	, or both,	
18585 SO HIGH SPF The above in the Stat SIGNATU	UTH HWY 441 RINGS, FL 326 e named entity s e of Florida. RE: Electror	43 submit	s this statement	ered Agent	se of changing i	ts register		, or both,	
18585 SO HIGH SPR The above in the Stat SIGNATU Election Ca	UTH HWY 441 RINGS, FL 326 e named entity s e of Florida. RE: Electror	43 submit nic Sig g Trust	s this statement nature of Regist	ered Agent					
18585 SO HIGH SPR The above in the Stat SIGNATU Election Ca	UTH HWY 441 RINGS, FL 326 e named entity se of Florida. RE: Electror mpaign Financing S AND DIREC	43 submit nic Sig g Trust TORS Delete BEORGI HWY 44	s this statement nature of Regist Fund Contribution : E.E.,	ered Agent			Date		

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: CYNTHIA L. MACKINNON SEC 01/13/2008