2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004702

FILED Jaņ 15, 2<u>00</u>9 Secretary of State

Entity Name: SCHRECKENGHAUST, MICHEL & PACK, INC.

Current Principal Place of Business: New Principal Place of Business:

381 BARD ROAD 104 CAPRI ISLE BLVD VENICE, FL 34293 VENICE, FL 34292

Current Mailing Address: New Mailing Address:

381 BARD ROAD P.O.BOX 38

NOKOMIS, FL 34274 VENICE, FL 34293

FEI Number: 56-2365631 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:

CARPENTER, THOMAS A JR. 333 SOUTH TAMIAMI TRL. #384 VENICE, FL 34285 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SCHRECKENGHAUST, REX SCHRECKENGHAUST, REX Name: Name: 381 BARD ROAD Address: 104 CAPRI ISLE BLVD UNIT 109 Address: VENICE, FL 34293 VENICE, FL 34292

City-St-Zip: City-St-Zip:

Title: VD Title: (X) Change () Addition () Delete MICHEL, JOHN Name: MICHEL, JOHN Name:

Address: 381 BARD ROAD Address: 104 CAPRI ISLE BLVD UNIT 109

City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34292

Title: STD () Delete Title: STD (X) Change () Addition

PACK, JOHN PACK, JOHN Name: Name: 381 BARD ROAD Address: Address:

104 CAPRI ISLE BLVD UNIT 109 City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34292

Title: () Delete Title: () Change () Addition Name: ARMSTRONG, SHIRLEY A Name: 440 E SHADE DR. Address: Address:

City-St-Zip: VENICE, FL 34293 City-St-Zip:

Title: () Delete Title: () Change () Addition

STAHL, MICHAEL J Name: Name: 504 WEXFORD DR. Address: Address: City-St-Zip: VENICE, FL 34293 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

KINESLY, ERIC KINGSLEY, ERIC Name: Name: Address: 381 BARD RD Address: 7829 PINE TRACE DR. VENICE, FL 34293 SARASOTA, FL 34243 City-St-Zip: 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: REX SCHRECKENGHAUST PD 01/15/2009

Electronic Signature of Signing Officer or Director

Date