2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008048

FILED Jul 05, 2008 Secretary of State

Entity Nan	ne: ALL STAR TWIRLERS OF N	ORTH FLORIDA INC.		
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	H COVE BLVD DITY, FL 32401			
Current M	ailing Address:	New Mailing Addres	ss:	
	H COVE BLVD DITY, FL 32401			
FEI Number: In accordanc	20-5311994 FEI Number Applied ce with s. 607.193(2)(b), F.S., the corpo		Certificate of Status Desired ()	
Name and	Address of Current Registered	Agent: Name and Address of	of New Registered Agent:	
	ANNA E H COVE BLVD CITY, FL 32401 US			
The above in the State		ent for the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of Reg	istered Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete COWDEN, JOHN M 215 NORTH COVE BLVD PANAMA CITY, FL 32401	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete WEBB, DEB L 326 SOUTH MAC ARTHUR PANAMA CITY, FL 32401	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete HOLLIMAN, ANGELA K 2800 WOODMERE DR PANAMA CITY, FL 32405	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JOHN M. COWDEN P 07/05/2008