2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# N07000001417

Entity Name: SWEATMONKEY, INC.

Current Principal Place of Business:

601 BAYSHORE BLVD., SUITE 700
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2100
LAKELAND, FL 33806

New Mailing Address:

FEI Number: 56-2641019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOLT, ROBERT S
601 BAYSHORE BLVD., SUITE 700
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	FIELDS, KAY	
Address:	P.O. BOX 2100	
City-St-Zip:	LAKELAND, FL 33806	
Title:	D	( ) Delete
Name:	KING, JENNIFER	
Address:	P.O. BOX 2100	
City-St-Zip:	LAKELAND, FL 33806	
Title:	D	( ) Delete
Name:	MAXWELL, VICKI	
Address:	P.O. BOX 2100	
City-St-Zip:	LAKELAND, FL 33806	
Title:	D	( ) Delete
Name:	TOMLINSON, MACON	
Address:	P.O. BOX 2100	
City-St-Zip:	LAKELAND, FL 33806	
Title:	D	( ) Delete
Name:	WHEELER, MARGARET A	
Address:	P.O. BOX 2100	
City-St-Zip:	LAKELAND, FL 33806	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: SCOTT FORE D 01/07/2008

Electronic Signature of Signing Officer or Director — Date