


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

601.25

DOCUMENT # N07000002729 1. Entity Name ARTISTS IN ACTION INTERNATIONAL, INC.	
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FILED

2008 JAN 18 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 507 N. FORT HARRISON CLEARWATER, FL 33755	Mailing Address 507 N. FORT HARRISON CLEARWATER, FL 33755
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2. Principal Place of Business - No P.O. Box # 2523 ESTANCIA BLVD Suite, Apt. #, etc.	3. Mailing Address PO Box 1693 Suite, Apt. #, etc.
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01022008 Chg-NP CR2E037 (12/06)

City & State CLEARWATER FLORIDA	City & State CLEARWATER Florida		
Zip 33761	Country USA	Zip 33757	Country US

4. FEI Number **06** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

JAFFE, LARRY
507 N. FORT HARRISON
CLEARWATER, FL 33755

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees** **Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete POTTER, JACK
NAME	2523 ESTANCIA BLVD.
STREET ADDRESS	CLEARWATER, FL 33761
CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete JAFFE, LARRY
NAME	507 N. FORT HARRISON
STREET ADDRESS	CLEARWATER, FL 33755
CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete MCFADYEN, BARBARA
NAME	100 WAVERLY WAY, #310
STREET ADDRESS	CLEARWATER, FL 33756
CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete LEUFAN, PAT
NAME	1117 WEBB DR.
STREET ADDRESS	CLEARWATER, FL 33755
CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete BRUCE, GEORGE F.
NAME	1231 S. HERCULES AVE.
STREET ADDRESS	CLEARWATER, FL 33764
CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete VANNIER, JESSICA
NAME	2256 ST. CHARLES DR.
STREET ADDRESS	CLEARWATER, FL 33764
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition LDSLEDGE
NAME	1516 COLONY COURT
STREET ADDRESS	PALM HARBOR, FLORIDA 34683
CITY-ST-ZIP	
TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	
STREET ADDRESS	800115487758
CITY-ST-ZIP	01/18/08--01008--002 **105.00
TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	
STREET ADDRESS	REBECCA MODICA
CITY-ST-ZIP	2183 EDYTHE DR DUNEDIN, FLORIDA 34698

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Jack Potter* 1-10-08