2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006724

Entity Name: SNATCH BACK INC

FILED Apr 26, 2009 Secretary of State

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

2658 GRANDE ISLE DRIVE 18216 ORANGE CITY, FL 32763

Current Mailing Address: New Mailing Address:

2658 GRANDE ISLE DRIVE 18216 ORANGE CITY, FL 32763

FEI Number: 26-3029817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLAKELY, ALISA M 2658 GRÁNDE ISLE DRIVE 18216 ORANGE CITY, FL 32763 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:

City-St-Zip:

City-St-Zip:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete BLAKELY, ALISA M Name: 2658 GRANDE ISLE DRIVE #18216 Address:

ORANGE CITY, FL 32763

City-St-Zip:

Title: () Delete HEARD, PAMELA R Name: Address: 3710 TRADE STREET City-St-Zip: DELTONA, FL 32738

Title: DIR () Delete HEARD, JAMES Name: Address: 3710 TRADE STREET

Title: DIR () Delete Name: ROBERTS, REGINA

Address: 1645 DUNLAWTON AVENUE # 1614

DELTONA, FL 32738

City-St-Zip: PORT ORANGE, FL 32127

Title: DIR () Delete ANDERSON, PAMELA Name: 157 LONG PINE DRIVE Address: City-St-Zip: DELTONA, FL 32725

Title: () Delete THOMPSON, JENNIFER Name: Address: 42 SANDALWOOD COURT

OVIEDO, FL 32765

(X) Change () Addition Name:

BLAKELY, ALISA M Address: 2658 GRANDE ISLE DRIVE #18216

City-St-Zip: ORANGE CITY, FL 32763

Title: (X) Change () Addition

Name: ROBERTS, REGINA L

Address: 3900 YORKTOWNE BOULEVARD APT. 503

City-St-Zip: PORT ORANGE, FL 32129

Title: OFF (X) Change () Addition

HEARD, JAMES Name: Address: 3710 TRADE STREET City-St-Zip: DELTONA, FL 32738

Title: OFF (X) Change () Addition Name: BALDWIN-MOORE, MICHELLE 2710 LEAFY WAY LANE Address: City-St-Zip: DELTONA, FL 32725

Title: OFF (X) Change () Addition

ROBERTS, ARCHIE Name:

3900 YORKTOWNE BOULEVARD APT. 503 Address:

City-St-Zip: PORT ORANGE, FL 32129

Title: (X) Change () Addition JOHNSON, SHAKIRA K Name: Address: 2658 GRANDE ISLE DR. 18216 City-St-Zip: ORANGE CITY, FL 32763

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: ALISA M. BLAKELY DIR 04/26/2009