

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003685

FILED
Apr 02, 2012
Secretary of State

Entity Name: SPARE YOUR PAIR, INC.

Current Principal Place of Business:

847 SOUTH MAIN STREET
WILDWOOD, FL 34785

New Principal Place of Business:

847 SOUTH MAIN STREET
WILDWOOD, FL 34785 UN

Current Mailing Address:

847 SOUTH MAIN STREET
WILDWOOD, FL 34785

New Mailing Address:

847 SOUTH MAIN STREET
WILDWOOD, FL 34785 UN

FEI Number: 27-0154349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNZ, C. STEVEN
847 SOUTH MAIN STREET
WILDWOOD, FL 34785 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: PD
Name: MUNZ, C. STEVEN
Address: 847 SOUTH MAIN STREET
City-St-Zip: WILDWOOD, FL 34785

Title: VPD
Name: MANNS, DWAYNE
Address: 9741 CR 209
City-St-Zip: WILDWOOD, FL 34785

Title: STD
Name: MUNZ, ERIN
Address: PO BOX 281
City-St-Zip: OXFORD, FL 34484

Title: D
Name: JOHNSON, HAYWARD JR
Address: 202 LEMON ST
City-St-Zip: WILDWOOD, FL 34785

Title: D
Name: WEICHERZ, DARRELL
Address: 9610 E GOSPEL ISLAND RD
City-St-Zip: INVERNESS, FL 34450

I hereby 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 all other like empowered.

SIGNATURE: C. STEVEN MUNZ

PD

04/02/2012

Electronic Signature of Signing Officer or Director

Date