

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000913

FILED  
Feb 25, 2010  
Secretary of State

**Entity Name:** SHOWMEN'S ASSOCIATION CHARITIES CORPORATION

**Current Principal Place of Business:**

6915 RIVERVIEW DR.  
RIVERVIEW, FL 33578 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 188  
GIBSONTON, FL 33534

**New Mailing Address:**

**FEI Number:** 59-3283862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SAXON, BERNICE S ESQ.  
101 E. KENNEDY BLVD.  
SUITE 3200  
TAMPA, FL 33602 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: MYERS, GLORIA  
Address: 8807 RIVERLACHEN  
City-St-Zip: RIVERVIEW, FL 33578 US

Title: TD  
Name: SIKES, CAROL J  
Address: 6111 PALM AVE.  
City-St-Zip: GIBSONTON, FL 33534 US

Title: VD  
Name: STARKEY, DELORES  
Address: 7715 RIVERVIEW DR  
City-St-Zip: RIVERVIEW, FL 33578 US

Title: SD  
Name: GAGNE, ROLAND  
Address: 2609 IRENE ST  
City-St-Zip: LUTZ, FL 33549 US

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: CAROL J. SIKES

TD

02/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date