

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 05, 2008
Secretary of State

DOCUMENT# N98000005270

Entity Name: STAGE 88, INC.**Current Principal Place of Business:**18553 ZINNIA RD.
FORT MYERS, FL 33912**New Principal Place of Business:****Current Mailing Address:**18553 ZINNIA RD.
FORT MYERS, FL 33967**New Mailing Address:****FEI Number:** 59-3539482**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WOLLMAN, EDWARD E
5129 CASTELLO DRIVE
SUITE 1
NAPLES, FL 34103 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 () Delete
Name: MCCLELLAN, MARK K
Address: 18553 ZINNIA RD.
City-St-Zip: FORT MYERS, FL 33967

Title: VD () Delete
Name: KELLY, JANEENE
Address: 26018
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TSD () Delete
Name: SHARPE, SABRINA M
Address: 110 OAKLAND HILLS DRIVE
City-St-Zip: NAPLES, FL 34113

Title: D (X) Delete
Name: DVONCH, JEROME J
Address: 3001 FIDDLERS BEND
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VEHLHABER, MICHELLE
Address: 5341 COVE CIRCLE
City-St-Zip: NAPLES, FL 34120

Title: VD (X) Change () Addition
Name: MCCLELLAN, MARK K
Address: 18553 ZINNIA ROAD
City-St-Zip: FORT MYERS, FL 33967

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: MARK MCCLELLAN

VD

05/05/2008

Electronic Signature of Signing Officer or Director

Date