2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071582

Entity Name: PRENTICE CORPORATION

FILED Jun 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5820 W CYPRESS ST STE B TAMPA, FL 33607 **Current Mailing Address: New Mailing Address:** 5820 W CYPRESS ST STE B TAMPA, FL 33607 FEI Number: 59-3732828 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: JOHNSON, PAUL B CRUZ, ALEIDA 112 S MAGNOLIA AVE 5820 W CYPRESS ST STE B TAMPA, FL 33606 TAMPA, FL 33607 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: ALEIDA CRUZ 06/20/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CRUZ, ALEIDA Name: Name: 5820 B W CYPRESS ST STE B Address: Address: City-St-Zip: TAMPA, FL 33607 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: AFIELD, WALTER E Name: 5820 W CYPRESS ST STE B Address: Address: TAMPA, FL 33607 US City-St-Zip: 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALTER AFIELD D 06/20/2008