

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000015149

Entity Name: FAME 2K, INC.

FILED
Jun 22, 2009
Secretary of State

Current Principal Place of Business:

597 HAVERTY COURT
SUITE 80
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

597 HAVERTY COURT
SUITE 80
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 30-0026217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTCHER, CYNTHIA
219 BENNETT STREET
WINTER SPRINGS, FL 32708 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, MICHAEL A
Address: 973 SABAL GROVE DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP () Delete
Name: THOMAS, CALVIN
Address: 1373 CRAWFORD DR
City-St-Zip: APOKA, FL 32703

Title: T () Delete
Name: ROFFY, DAWN
Address: 72 WOODBURY DR
City-St-Zip: PALM COAST, FL 32164

Title: D () Delete
Name: BUTCHER, CYNTHIA
Address: 219 BENNETT ST
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: LAMB, MURRAY
Address: 1680 W LAKE BRANTLEY RD
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL A SMITH

P

06/22/2009

Electronic Signature of Signing Officer or Director

Date