2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000029703

1. Entity Name
SANTA PROPERTIES CORP.

Principal Place of Business	Mailing Address
5364-171 EHRLICH RD TAMPA, FL 33624	5364-171 EHRLICH RD TAMPA, FL 33624

02112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0416875
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FEINBERG, JEFFREY
4000 HOLLYWOOD BLVD, STE 350-N
HOLLYWOOD, FL 33021

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000831055
02/27/08-80002-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	DIBBS, MICHAEL
STREET ADDRESS	5364-171 EHRLICH RD
CITY-ST-ZIP	TAMPA, FL 33624
TITLE	V
NAME	DIBBS, STEVEN
STREET ADDRESS	5364-171 EHRLICH RD
CITY-ST-ZIP	TAMPA, FL 33624
TITLE	S
NAME	DIBBS, SHAWNEKA
STREET ADDRESS	5364-171 EHRLICH RD
CITY-ST-ZIP	TAMPA, FL 33624
TITLE	T
NAME	DIBBS, SHANE
STREET ADDRESS	5364-171 EHRLICH RD
CITY-ST-ZIP	TAMPA, FL 33624
TITLE	D
NAME	DIBBS, PAULETTE
STREET ADDRESS	5364-171 EHRLICH RD
CITY-ST-ZIP	TAMPA, FL 33624
TITLE	C
NAME	DIBBS, VICTORIA
STREET ADDRESS	5364-171 EHRLICH RD
CITY-ST-ZIP	TAMPA, FL 33624

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. Dibbs Shawneka Dibbs 2/11/08 (813) 900-8902
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #