

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000116918

Entity Name: SHOW SECRETARIES, INC.

FILED
Aug 31, 2007
Secretary of State

Current Principal Place of Business:

1305 OAK VALLEY DRIVE
SEFFNER, FL 33584

New Principal Place of Business:

Current Mailing Address:

PO BOX 3268
BRANDON, FL 33509

New Mailing Address:

PO BOX 7090
SEFFNER, FL 33583

FEI Number: 13-4217785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGHORN, GAIL
PO BOX 3268
BRANDON, FL 33509 US

Name and Address of New Registered Agent:

BERGHORN, GAIL
1305 OAK VALLEY DR
SEFFNER, FL 33584 US

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:

08/31/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BERGHORN, GAIL
Address: PO BOX 3268
City-St-Zip: BRANDON, FL 33509

Title: VD () Delete
Name: JACKSON, SHARON
Address: PO BOX 3268
City-St-Zip: BRANDON, FL 33509

Title: STD () Delete
Name: STEFFENHAGEN, GLENN
Address: 4650 RUSTIC DR
City-St-Zip: PUNTA GORDA, FL 33982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BERGHORN, GAIL
Address: PO BOX 7090
City-St-Zip: SEFFNER, FL 33583

Title: VD (X) Change () Addition
Name: STEFFENHAGEN, GLENN
Address: 4650 RUSTIC DR
City-St-Zip: PUNTA GORDA, FL 33982

Title: STD (X) Change () Addition
Name: BERGHORN, BRYAN
Address: 1305 OAK VALLEY DRIVE
City-St-Zip: SEFFNER, FL 33584

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: GAIL BERGHORN

PD

08/31/2007

Electronic Signature of Signing Officer or Director

Date