## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 03, 2008 08:00 A Secretary of State **DOCUMENT # P04000035136 GASPARILLA DESIGNS INC** Principal Place of Business Mailing Address 15508 MELPORT CIRCLE 15508 MELPORT CIRCLE PORT CHARLOTTE, FL 33981 US PORT CHARLOTTE, FL 33981 US No Chg-P CR2E034 (11/05) 01052008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 90-0147059 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required DO NOT WRITE 6. Name and Address of Current Registered Agent KNAPP, DERRICK 15507 MELPORT CIRCLE IN THIS SPACE PORT CHARLOTTE, FL 33981 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) A STANFILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS NAME . . . KNAPP, DERRICK K 15507 MELPORT CIRCLE STREET ADDRESS PORT CHARLOTTE, FL 33981 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby 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:

STREET ADDRESS CITY-ST-ZIP

NAME . STREET ADDRESS CITY-ST-ZIP