

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049453

FILED
Apr 29, 2008
Secretary of State

Entity Name: STORE OR SHIP, INC.

Current Principal Place of Business:

800 SECOND AVE SOUTH STE 380
ST PETERSBURG, FL 33701

New Principal Place of Business:

51 S MAIN AVENUE
SUITE 309
CLEARWATER, FL 33765

Current Mailing Address:

800 SECOND AVE SOUTH STE 380
ST PETERSBURG, FL 33701

New Mailing Address:

51 S MAIN AVENUE
SUITE 309
CLEARWATER, FL 33765

FEI Number: 34-2001225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LECOMPTE, MORRIS A
800 SECOND AVE SOUTH STE 380
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

WILDER, JIMMIE R
51 S MAIN AVENUE
SUITE 309
CLEARWATER, FL 33765 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: JIMMIE R WILDER

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: HANSEN, JOHN B
Address: 515 BELLE ISLE AVENUE
City-St-Zip: BELLEAIR BEACH, FL 33786 US

Title: VP () Delete
Name: LECOMPTE, MORRIS A
Address: 800 SECOND AVENUE SOUTH SUITE 380
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HANSEN, JOHN B
Address: 51 S MAIN AVENUE, SUITE 309
City-St-Zip: CLEARWATER, FL 33765 US

Title: VP (X) Change () Addition
Name: HANSEN, AMY M
Address: 51 S MAIN AVENUE, SUITE 309
City-St-Zip: CLEARWATER, FL 33765 US

Title: TREA () Change (X) Addition
Name: HANSEN, AMY M
Address: 51 S MAIN AVENUE, SUITE 309
City-St-Zip: CLEARWATER, FL 33765

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: JOHN B HANSEN

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date