2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000050142

Entity Name: SINFULLY SWEET & GIFTS, INC.

FILED Feb 08, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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610 W. MAIN STREET LEESBURG, FL 34748

Current Mailing Address: New Mailing Address:

610 W. MAIN STREET LEESBURG, FL 34748

FEI Number: 20-0889013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOLMES, SUZANNE G
6201 CAROLINA AVE.
LEESBURG, FL 34748 US
BUTLER, MARY B
610 WEST MAIN STREET
LEESBURG, FL 34748 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: MARY B. BUTLER 02/08/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: D (X) Change () Addition Name: HOLMES, SUZANNE G PRES Name: HOLMES, SUZANNE G Address: 6201 CAROLINA AVE. 6201 CAROLINA AVE.

LEESBURG, FL 34748 US

Address.

City-St-Zip: LEESBURG, FL 34748 US

Title: Title: DPS (X) Change () Addition () Delete HANSON, TRACEY A Name: Name: BUTLER, MARY B 9740 FAIRWAY CIR 610 WEST MAIN STREET Address: Address: LEESBURG, FL 34748 LEESBURG, FL 34748 City-St-Zip: City-St-Zip:

Title: () Delete Title: DVT () Change (X) Addition

 Name:
 Name:
 GRIGGS, TAMMIE

 Address:
 Address:
 610 WEST MAIN STREET

 City-St-Zip:
 City-St-Zip:
 LEESBURG, FL 34748

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: MARY B. BUTLER P 02/08/2008