

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079295

FILED
Apr 23, 2008
Secretary of State

Entity Name: UN-REEL PRODUCTIONS INC.

Current Principal Place of Business:

9310 SOUTH OLD KINGS ROAD
SUITE 1002
JACKSONVILLE, FL 32257

New Principal Place of Business:

11626 SUMMER BROOK CT
JACKSONVILLE, FL 32258

Current Mailing Address:

11626 SUMMER BROOK COURT
JACKSONVILLE, FL 32258

New Mailing Address:

11626 SUMMER BROOK CT
JACKSONVILLE, FL 32258

FEI Number: 20-1050615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUTZ, BLAIR B
11626 SUMMER BROOK COURT
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: PUTZ, BLAIR B
Address: 11626 SUMMER BROOK COURT
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP () Delete
Name: PUTZ, DAVID D
Address: 11626 SUMMER BROOK COURT
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP () Delete
Name: THOMPSON, SAM A
Address: 11626 SUMMER BROOK COURT
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: THOMPSON, SAM A
Address: 5917 PAVILION DR
City-St-Zip: JACKSONVILLE, FL 32258

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: BLAIR B PUTZ

MRS

04/23/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date