

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092475

FILED
Apr 28, 2006
Secretary of State

Entity Name: SHOWSCAPE PLANNING & DESIGN, INC.

Current Principal Place of Business:

130 IRWIN ST W
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

2642 CEDAR VIEW COURT
CLEARWATER, FL 33761 US

Current Mailing Address:

130 IRWIN ST W
SAFETY HARBOR, FL 34695 US

New Mailing Address:

2642 CEDAR VIEW COURT
CLEARWATER, FL 33761 US

FEI Number: 33-1095060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COUNTRYMAN, JOHN A
16011 NEBRASKA AVE NORTH
STE 106
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

COUNTRYMAN, JOHN A
16011 NEBRASKA AVE NORTH
STE 106
LUTZ, FL 335496158 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: JOHN A. COUNTRYMAN

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MONTGOMERY, JAMES W JR
Address: 320 TUCKER ST
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DPST () Delete
Name: RAMSAIER, HERBERT
Address: 130 IRWIN ST W
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: RAMSAIER, HERBERT
Address: 2642 CEDAR VIEW COURT
City-St-Zip: CLEARWATER, FL 33761

Title: D (X) Change () Addition
Name: JENKINS, LINDA C
Address: 714 EAST SANTA PAULA STREET
City-St-Zip: SANTA PAULA, CA 93060

I hereby certify that the information supplied with this filing does not qualify for the 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 A. COUNTRYMAN, CPA

CPA

04/28/2006

Electronic Signature of Signing Officer or Director

Date