

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101604

Entity Name: SHEDS N'MORE INC.

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

603 LEONARD BLVD N
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

603 LEONARD BLVD N
LEHIGH ACRES, FL 33971

New Mailing Address:

FEI Number: 20-1341647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAHLKE, NANCY D
303 FIFTH AVE
LEHIGH ACRES, FL 33936 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: PRES () Delete
Name: DAHLKE, NANCY PRES
Address: 303 FIFTH AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP () Delete
Name: DAHLKE, DENNIS VP
Address: 303 FIFTH AVE
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DAHLKE, DENNIS PRES
Address: 303 FIFTH AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP (X) Change () Addition
Name: DAHLKE, NANCY VP
Address: 303 FIFTH AVE
City-St-Zip: LEHIGH ACRES, FL 33936

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: NANCY DAHLKE

VP

04/10/2008

Electronic Signature of Signing Officer or Director

Date