2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000106867

FILED Apr 29, 2005 Secretary of State

Entity Name: SHOT ACROSS THE BOW PRODUCTIONS, INC.

Current Principal Place of Business:			New Principal Place of Business:			
06 SE 24 CALA, F						
urrent Mailing Address:		New Mailing Address:				
06 SE 24 CALA, F						
El Number	: 20-1399782	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status D	Desired ()
ame and	d Address of C	Current Registered Agent:	Name and	Address of	New Registered Age	ent:
06 SE 24						
he above	L 34471 Us e named entity:	S submits this statement for the	purpose of changing i	ts registered o	office or registered ag	gent, or both,
	L 34471 US		purpose of changing i	ts registered (office or registered ag	gent, or both,
he above the State	E 34471 US e named entity : e of Florida. RE:	submits this statement for the		ts registered (gent, or both,
ne above the State	E named entity of e named entity of e of Florida. RE: Electror			ts registered (office or registered ag Date	gent, or both,
he above the State GNATU	E named entity of e named entity of e of Florida. RE: Electror	submits this statement for the nic Signature of Registered Age Trust Fund Contribution ().	gent			
he above the State IGNATUI	e named entity e of Florida. RE: Electror mpaign Financing S AND DIREC	submits this statement for the nic Signature of Registered A g Trust Fund Contribution (). TORS: Delete ATTHEW A	gent	IS/CHANGES	Date	
ne above the State GNATUI ection Car FFICER le: ame: ldress:	e named entity e e of Florida. RE: Electror mpaign Financing S AND DIREC D () BERGLUND, M 406 SE 24TH S OCALA, FL 34 D () PENCE, JAMES	submits this statement for the nic Signature of Registered Arg Trust Fund Contribution (). TORS:) Delete ATTHEW A SIT 471) Delete S R CHTON RD APT 96A	gent ADDITION Title: Name: Address:	IS/CHANGES	Date TO OFFICERS AND Change () Addition CONTROL CON	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MATTHEW A. BERGLUND PRES 04/29/2005