

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107062

FILED
Jun 05, 2005
Secretary of State

Entity Name: SHOWCASE RESTORATIONS & COMPANY, INC.

Current Principal Place of Business:

21203 NW 210 AVE
HIGH SPRINGS, FL 32643

New Principal Place of Business:

Current Mailing Address:

21203 NW 210 AVE
HIGH SPRINGS, FL 32643

New Mailing Address:

PO BOX 1022
HIGH SPRINGS, FL 32655

FEI Number: 20-1343327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, NICHOLAS R
3006 SW 23 ST
GAINESVILLE, FL 32608 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON, WANDA D
Address: PO BOX 238
City-St-Zip: HIGH SPRINGS, FL 32655

Title: VST () Delete
Name: WILSON, NICHOLAS R
Address: PO BOX 1022
City-St-Zip: HIGH SPRINGS, FL 32655

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: OFF () Change (X) Addition
Name: WILSON, GARY V
Address: PO BOX 238
City-St-Zip: HIGH SPRINGS, FL 32655

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: GARY V. WILSON

SEC

06/05/2005

Electronic Signature of Signing Officer or Director

Date