2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000135925

Entity Name: SCHERER INTERNATIONAL, INC.

FILED Sep 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16547 SWAN VIEW CIRCLE 17675 JAMESTOWN WAY ODESSA, FL 33556 US C

LUTZ, FL 33558 US

Current Mailing Address: New Mailing Address:

16547 SWAN VIEW CIRCLE 17675 JAMESTOWN WAY ODESSA, FL 33556 US C

LUTZ, FL 33558 US

FEI Number: 68-0594788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHERER, BRIAN K

16547 SWAN VIEW CIRCLE

ODESSA, FL 33556 US

SCHERER, BRIAN K

17675 JAMESTOWN WAY

C

C

LUTZ, FL 33558 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: 09/01/2008

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: SCHERER, JOAN F SCHERER, JOAN F

 Address:
 16547 SWAN VIEW CIRCLE
 Address:
 17675 JAMESTOWN WAY

 City-St-Zip:
 ODESSA, FL 33556 US
 City-St-Zip:
 LUTZ, FL 33558 US

Title: Title: (X) Change () Addition () Delete SCHERER, BRIAN K Name: Name: SCHERER, BRIAN K 16547 SWAN VIEW CIRCLE Address: 17675 JAMESTOWN WAY Address: ODESSA, FL 33556 US LUTZ, FL 33558 US City-St-Zip: City-St-Zip:

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: BRIAN K. SCHERER VP 09/01/2008