

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000008107

FILED
Mar 07, 2008
Secretary of State

Entity Name: SINCERELY YOURS OF PORT CHARLOTTE, INC.

Current Principal Place of Business:

1825 TAMIAMI TRAIL,B5
PORT CHARLOTTE, FL 33948 US

New Principal Place of Business:

Current Mailing Address:

1825 TAMIAMI TRAIL B5
PORT CHARLOTTE, FL 33948 US

New Mailing Address:

FEI Number: 20-2167029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRICE, SHANNON D
24437 LAKEVIEW PLACE
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

PRICE, SHANNON D
2613 VALERIAN WAY
NORTH PORT, FL 34289 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:

03/07/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRICE, SHANNON D P
Address: 24437 LAKEVIEW PLACE
City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: VP () Delete
Name: PRICE, KENNETH J VP
Address: 24437 LAKEVIEW PL
City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: S () Delete
Name: PRICE, CARRIE L S
Address: 24437 LAKEVIEW PLACE
City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: T () Delete
Name: PRICE, KENNETH L T
Address: 24437 LAKEVIEW PLACE
City-St-Zip: PORT CHARLOTTE, FL 33980 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PRICE, SHANNON D P
Address: 2613 VALERIAN WAY
City-St-Zip: NORTH PORT, FL 34289 US

Title: VP (X) Change () Addition
Name: PRICE, KENNETH J VP
Address: 2613 VALERIAN WAY
City-St-Zip: NORTH PORT, FL 34289 US

Title: S (X) Change () Addition
Name: PRICE, CARRIE L S
Address: 2613 VALERIAN WAY
City-St-Zip: NORTH PORT, FL 34289 US

Title: T (X) Change () Addition
Name: PRICE, KENNETH L T
Address: 2613 VALERIAN WAY
City-St-Zip: NORTH PORT, FL 34289 US

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: SHANNON PRICE

P

03/07/2008

Electronic Signature of Signing Officer or Director

Date