2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000018565

Entity Name: THE SPONGEE COMPANY

FILED Apr 21, 2009 Secretary of State

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

325 HENDERSON BLVD 3825 HENDERSON BLVD 604

604

TAMPA, FL 33629 TAMPA, FL 33629

Current Mailing Address: New Mailing Address:

P.O. BOX 320952 P.O. BOX 320952 TAMPA, FL 336792952 TAMPA, FL 33679

FEI Number: 20-2245629 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:

SHACKELFORD, ROSEMARY LAWSON, SONIA 1270 ROGERS STREET STE A 3825 HENDERSON BLVD #604 CLEARWATER, FL 33756 TAMPA, FL 33679

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: ISI SONIA LAWSON 04/21/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

SHACKELFORD, ROSEMARY Name: Name: LAWSON, SONIA

1270 ROGERS STREET SUITE A Address: 3825 HENDERSON BLVD #604 Address:

City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: TAMPA, FL 33679

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: /S/ SONIA LAWSON **OFF** 04/21/2009