2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008
Secretary of State

DOCUMENT# P06000060800

Entity Name: SOLDIER CITY BUSINESS SERVICES, INC.

Current Principal Place of Business:

4640 SOUTHSIDE BLVD.
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

4640 SOUTHSIDE BLVD.
SEBRING, FL 33870

New Mailing Address:

FEI Number: 20-4841923 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWAINE, ROBERT S
425 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ROWE, GRANT
Address: 4640 SOUTHSIDE BLVD.
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete
Name: ROWE, BLAKE
Address: 4640 SOUTHSIDE BLVD.
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete
Name: ROWE, KELLY
Address: 4640 SOUTHSIDE BLVD.
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ROWE, GRANT
Address: 4640 SOUTHSIDE BLVD.
City-St-Zip: SEBRING, FL 33870

Title: VP (X) Change ( ) Addition
Name: ROWE, BLAKE
Address: 4640 SOUTHSIDE BLVD.
City-St-Zip: SEBRING, FL 33870

Title: TR (X) Change ( ) Addition
Name: ROWE, KELLY
Address: 4640 SOUTHSIDE BLVD.
City-St-Zip: SEBRING, FL 33870

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: GRANT ROWE PD 01/29/2008

Electronic Signature of Signing Officer or Director — Date