


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000072160	
1. Entity Name MIZ SHIRLEY, INC.	

Principal Place of Business 5082 SANDPIPER DRIVE ST. JAMES CITY, FL 33956	Mailing Address 5082 SANDPIPER DRIVE ST. JAMES CITY, FL 33956
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01312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4940393	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DRIGGERS, JAMES 5082 SANDPIPER DRIVE ST. JAMES CITY, FL 33956	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000822439 02/19/08-60069-017 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P.S DRIGGERS, JAMES 5082 SANDPIPER DRIVE ST. JAMES CITY, FL 33956
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP,T DRIGGERS, SHIRLEY 5082 SANDPIPER DRIVE ST. JAMES CITY, FL 33956
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other, like empowered.

SIGNATURE: <i>Shirley Driggers</i> Shirley Driggers	Date: 2-9-08	Daytime Phone #: 239-283-4686
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