

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117463

FILED
May 01, 2008
Secretary of State

Entity Name: SIX PRODUCTIONS OF CHARLOTTE COUNTY FIELD, INC.

Current Principal Place of Business:

2475 SUFFOLK STREET
PORT CHARLOTTE, FL 33948 US

New Principal Place of Business:

2828 S. MCCALL RD.
17
ENGLEWOOD, FL 34224 US

Current Mailing Address:

2475 SUFFOLK STREET
PORT CHARLOTTE, FL 33948 US

New Mailing Address:

FEI Number: 56-2609325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SENSEMAN, JAMES A
2475 SUFFOLK STREET
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

SENSEMAN, JAMES A
2828 S. MCCALL RD.
17
ENGLEWOOD, FL 34224 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: _____

05/01/2008

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:

Title: P () Delete
Name: SENSEMAN, JAMES A
Address: 2475 SUFFOLK STREET
City-St-Zip: PORT CHARLOTTE, FL 33948 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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: JAMES A SENSEMAN

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date