2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000019182

Entity Name: SOCIAL BUTTERFLIES, INC.

FILED Apr 16, 2008 Secretary of State

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

4783 VIA PALM LAKE 3650 WHITEHALL DRIVE

APARTMENT 104 SUITE 304

WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

2255 MARILLA DRIVE APARTMENT 3303 DALLAS, TX 75201 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMPSON, DAVICKA N THOMPSON, DAVICKA N 3650 WHITEHALL DRIVE 4783 VIA PALM LAKE **APARTMENT 104** SUITE 304

WEST PALM BEACH, FL 33417 US WEST PALM BEACH, FL 33401 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: 04/16/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition THOMPSON, DAVICKA N THOMPSON, DAVICKA N Name: Name:

4783 VIA PALM LAKE, #104 3650 WHITEHALL DRIVE, SUITE 304 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33417 US City-St-Zip: WEST PALM BEACH, FL 33401 US

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

Name: PITTMAN, CHANELLE D Name: HARPER, CHANELLE P 1223 PINE SAGE CIRCLE Address: 2004 EMBASSY DRIVE Address:

WEST PALM BEACH, FL 33409 US WEST PALM BEACH, FL 33401 US City-St-Zip: 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.

Ρ SIGNATURE: DAVICKA N. THOMPSON 04/16/2008