

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000090689

Entity Name: SPLINTERS-N-MORE, INC.

FILED  
Feb 11, 2009  
Secretary of State

## Current Principal Place of Business:

35 BURNING BUSH DR.  
PALM COAST, FL 32137 US

## New Principal Place of Business:

1509 WINDWARD LANE  
NEPTUNE BEACH, FL 32266 US

## Current Mailing Address:

35 BURNING BUSH DR.  
PALM COAST, FL 32137 US

## New Mailing Address:

1509 WINDWARD LANE  
NEPTUNE BEACH, FL 32266 US

FEI Number: 26-0712848

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLLINS, JILL L  
35 BURNING BUSH DR.  
PALM COAST, FL 32137 US

## Name and Address of New Registered Agent:

DAVIS, PAM R  
1509 WINDWARD LANE  
NEPTUNE BEACH, FL 32266 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: PAM DAVIS

02/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COLLINS, JILL L  
Address: 35 BURNING BUSH DR.  
City-St-Zip: PALM COAST, FL 32137 US

Title: VP ( ) Delete  
Name: DAVIS, PAMELA R  
Address: 1509 WINDWARD LANE  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

Title: T ( ) Delete  
Name: LAWRENCE, CYNTHIA M  
Address: 35 BURNING BUSH DR.  
City-St-Zip: PALM COAST, FL 32137 US

Title: S ( ) Delete  
Name: TAYLOR, MARGRET S  
Address: 1509 WINDWARD LANE  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DAVIS, PAM R  
Address: 1509 WINDWARD LANE  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: DAVIS, PAM R  
Address: 1509 WINDWARD LANE  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

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: MARGARET TAYLOR

S

02/11/2009

Electronic Signature of Signing Officer or Director

Date