

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000018960

FILED  
Mar 31, 2010  
Secretary of State

**Entity Name:** SECOND CHANCE PRODUCTIONS INC.

**Current Principal Place of Business:**

6700 SW 117 STREET  
PINECREST, FL 33156 US

**New Principal Place of Business:**

**Current Mailing Address:**

6700 SW 117 STREET  
PINECREST, FL 33156 US

**New Mailing Address:**

**FEI Number:** 26-1969167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WESTMAN, MARK P  
6700 SW 117 STREET  
PINECREST, FL 33156 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:** P  
**Name:** WESTMAN, MARK F  
**Address:** 6700 SW 117 STREET  
**City-St-Zip:** PINECREST, FL 33156 US

**Title:** VP  
**Name:** WESTMAN, MARK P  
**Address:** 6700 SW 117 STREET  
**City-St-Zip:** PINECREST, FL 33156 US

**Title:** VP  
**Name:** WESTMAN, ILEANA C  
**Address:** 6700 SW 117 STREET  
**City-St-Zip:** PINECREST, FL 33156 US

**Title:** DIR  
**Name:** WESTMAN, MICHELLE K  
**Address:** 6700 SW 117 ST  
**City-St-Zip:** PINECREST, FL 33156

I hereby 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 all other like empowered.

**SIGNATURE:** MARK P WESTMAN

VP

03/31/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date