

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000030084

Entity Name: SP ONE HOLDINGS, INC.

FILED  
Apr 14, 2009  
Secretary of State

## Current Principal Place of Business:

1205 WEST SWANN AVENUE  
TAMPA, FL 33606

## New Principal Place of Business:

1205 W. SWANN AVENUE  
TAMPA, FL 33606 US

## Current Mailing Address:

1205 WEST SWANN AVENUE  
TAMPA, FL 33606

## New Mailing Address:

1205 W. SWANN AVENUE  
TAMPA, FL 33606 US

FEI Number: 26-2314166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MESSINGER, DAVID A  
150 W FLAGLER STREET, MUSEUM TOWER  
SUITE 2200  
MIAMI, FL 33130 US

## Name and Address of New Registered Agent:

KOEHLER, DEBRA F  
1205 W. SWANN AVENUE  
TAMPA, FL 33606 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: DEBRA KOEHLER

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,T ( ) Change (X) Addition  
Name: KOEHLER, DEBRA F  
Address: 1205 W. SWANN AVENUE  
City-St-Zip: TAMPA, FL 33606 US

Title: VP,S ( ) Change (X) Addition  
Name: TURNER, TODD S  
Address: 1205 W. SWANN AVENUE  
City-St-Zip: TAMPA, FL 33606 US

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: DEBRA F. KOEHLER

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date