

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000035342

**FILED**  
**Mar 16, 2009**  
**Secretary of State**

**Entity Name:** EIGHT PENNIES ARCADE, INC.

**Current Principal Place of Business:**

10500 SE JUPITER NARROWS DR  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

11181 FEDERAL HWY  
HOBE SOUND, FL 33455

**Current Mailing Address:**

10500 SE JUPITER NARROWS DR  
HOBE SOUND, FL 33455

**New Mailing Address:**

FEI Number: 26-2380690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMOCK, SUSAN  
10500 SE JUPITER NARROWS DR  
HOBE SOUND, FL 33455 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: DP ( ) Delete  
Name: SMOCK, SUSAN  
Address: 10500 SE JUPITER NARROWS DR  
City-St-Zip: HOBE SOUND, FL 33455

**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: SUSAN SMOCK

DIR

03/16/2009

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

\_\_\_\_\_ Date