

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000055549

FILED
Mar 19, 2009
Secretary of State

Entity Name: SCORPION ENTERTAINMENT, INC

Current Principal Place of Business:

2506 MARCH HARE LN
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

2506 MARCH HARE LN
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 26-2752680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRELL, DAVID R II
2506 MARCH HARE LN
JACKSONVILLE, FL 32210 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 () Delete
Name: HARRELL, DAVID R II
Address: 2506 MARCH HARE LN
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP () Delete
Name: HALL, GWENDOLYN D
Address: 2506 MARCH HARE LN
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: FS () Delete
Name: FORCINE-KIRKLAND, KENDRA M
Address: 4901 SUNBEAM RD. APT 720
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: S () Delete
Name: HARRELL, DESIREE R
Address: 2506 MARCH HARE LN.
City-St-Zip: JACKSONVILLE, FL 32210 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: FS (X) Change () Addition
Name: FORCINE-KIRKLAND, KENDRA M
Address: 122251 KNIGHTS KROSSING CIR. BLDG. 8 #6B
City-St-Zip: ORLANDO, FL 32817 US

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

Title: PR () Change (X) Addition
Name: ELLIOTT, ANDRE D
Address: 5170 COLLINS RD. #1904
City-St-Zip: JACKSONVILLE, FL 32244 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: DAVID R. HARRELL, II

P

03/19/2009

Electronic Signature of Signing Officer or Director

Date