

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000057518

Entity Name: SCARFONE PRODUCTIONS, INC.

FILED
Apr 06, 2009
Secretary of State

Current Principal Place of Business:

5163 EUROPA DRIVE
SUITE F
BOYNTON BEACH, FL 33437 US

Current Mailing Address:

5163 EUROPA DRIVE
SUITE F
BOYNTON BEACH, FL 33437 US

New Principal Place of Business:

110 N. LAKESIDE DR.
2
LAKE WORTH, FL 33460 US

New Mailing Address:

110 N. LAKESIDE DR.
2
LAKE WORTH, FL 33460 US

FEI Number: 26-2795924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARFONE, KERI
5163 EUROPA DRIVE
F
BOYNTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

SCARFONE, KERI
110 N. LAKESIDE DR.
2
LAKE WORTH, FL 33460 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:

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCARFONE, KERI
Address: 5163 EUROPA DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: VP () Delete
Name: SCARFONE, PHILIP
Address: 5163 EUROPA DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCARFONE, KERI
Address: 110 N. LAKESIDE DR. #2
City-St-Zip: LAKE WORTH, FL 33460 US

Title: VP (X) Change () Addition
Name: SCARFONE, PHILIP
Address: 110 N. LAKESIDE DR. #2
City-St-Zip: LAKE WORTH, FL 33460 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: KERI SCARFONE

P

04/06/2009

Electronic Signature of Signing Officer or Director

Date