2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096841

Entity Name: TWO MORE WEEKS INC.

FILED May 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

455 BARNACLE LANE 981-B E. EAU GALLIE BLVD

INDIALANTIC, FL 32903 INDIAN HARBOR BEACH, FL 32937

Current Mailing Address: New Mailing Address:

455 BARNACLE LANE 981-B E. EAU GALLIE BLVD

INDIALANTIC, FL 32903 INDIAN HARBOR BEACH, FL 32937

FEI Number: 26-3670491 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PARKER, SHANON
455 BARNACLE LANE
PARKER, SHANON
981-B E. EAU GALLIE BLVD

INDIALANTIC, FL 32903 US INDIAN HARBOR BEACH, FL 32937 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: SHANON PARKER 05/04/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

INDIALANTIC, FL 32903

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

INDIAN HARBOR BEACH, FL 32937

Title: P () Delete Title: P (X) Change () Addition

 Name:
 PARKER, SHANON
 Name:
 PARKER, SHANON

 Address:
 455 BARNACLE LANE
 Address:
 981-B E. EAU GALLIE BLVD

 City-St-Zip:
 INDIALANTIC, FL 32903
 City-St-Zip:
 INDIAN HARBOR BEACH, FL 32937

VΡ Title: VΡ (X) Change () Addition Title: () Delete PARKER, MAURICE JR. Name: PARKER, MAURICE JR. Name: 455 BARNACLE LANE 981-B E. EAU GALLIE BLVD Address: Address: INDIALANTIC, FL 32903 INDIAN HARBOR BEACH, FL 32937 City-St-Zip: City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

Name: PARKER, TRAVIS Name: PARKER, TRAVIS
Address: 455 BARNACLE LANE Address: 981-B E. EAU GALLIE BLVD

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.

City-St-Zip:

SIGNATURE: SHANON PARKER P 05/04/2009