

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000061022

Entity Name: SIX PACK VENTURES, INC.

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

14215 NW 142ND PLACE  
ALACHUA, FL 32615

**New Principal Place of Business:**

18827 SE 24TH AVE  
HAWTHORNE, FL 32640

**Current Mailing Address:**

14215 NW 142ND PLACE  
ALACHUA, FL 32615

**New Mailing Address:**

18827 SE 24TH AVE  
HAWTHORNE, FL 32640

FEI Number: 27-0431518

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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  
Name: SINCLAIR, ANA P  
Address: 18827 SE 24TH AVE  
City-St-Zip: HAWTHORNE, FL 32640

Title: V  
Name: SINCLAIR, MURRAY D  
Address: 18827 SE 24TH AVE  
City-St-Zip: HAWTHORNE, FL 32640

I hereby 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 all other like empowered.

SIGNATURE: ANA SINCLAIR

P

04/27/2010

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

\_\_\_\_\_  
Date