

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20627

FILED
Apr 28, 2008
Secretary of State

Entity Name: REITHOFFER SHOWS, INC.

Current Principal Place of Business:

9022 WIGGINS RD
GIBSONTONT, FL 33534 US

New Principal Place of Business:

Current Mailing Address:

B.G. STEPHENSON LTD.
4157 CHAIN BRIDGE ROAD
FAIRFAX, VA 22030 US

New Mailing Address:

FEI Number: 52-0690094 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENSON, ALBERT CRAIG
2810 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308 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: CEO () Delete
Name: REITHOFFER, RICHARD, H.
Address: 9022 WIGGINS ROAD
City-St-Zip: GIBSONTONT, FL 33534

Title: VP () Delete
Name: REITHOFFER, PATRICK, E. III
Address: 19468 CAMP LANE
City-St-Zip: JUPITER, FL 33478

Title: S () Delete
Name: REITHOFFER, MARIANNE,
Address: 9022 WIGGINS RD.
City-St-Zip: GIBSONTONT, FL. 33534, 33534

Title: D () Delete
Name: REITHOFFER, BETTE A.,
Address: 154 MONTEREY WAY
City-St-Zip: ROYAL PALM BCH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MARIANNE REITHOFFER

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04/28/2008

Electronic Signature of Signing Officer or Director

Date