2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000074497

Entity Name: BIG TOP OF TAMPA, INC.

FILED Feb 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9250 FOWLER AVENUE THONOTOSASSA, FL 33592 **Current Mailing Address: New Mailing Address:** 1275 BEVILLE RD. DAYTONA BEACH, FL 32119 FEI Number: 59-3272831 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: SHADDIX, STEVEN L SHADDIX, STEVEN L 1275 BEVILLE RD 1275 BEVILLE RD DAYTONA BCH, FL 32119 DAYTONA BCH, FL 32119 US 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: STEVEN L. SHADDIX 02/12/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SHADDIX, STEVEN L Name: Name: 12888 S.E. HWY 441 Address: Address: City-St-Zip: BELLEVIEW, FL 34420 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: GORDON, SHARON L Name: GORDON, SHARON L 7611 TIMBERLY CT 7611 TIMBERLY CT Address: Address: MCLEAN, VA MCLEAN, VA 22102 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: () Delete DV SHADDIX, STANLEY WM SHADDIX, WILLIAM S Name: Name: 2130 OLD DAYTONA ROAD 2130 OLD DAYTONA ROAD Address: Address: City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: PORT ORANGE, FL 32128 Title: () Delete Title: (X) Change () Addition SHADDIX, WILLIAM O II SHADDIX, WILLIAM O II Name: Name: Address: 1 DEERMOSS TRAIL Address: 1 DEERMOSS TRAIL City-St-Zip: City-St-Zip: ORMOND BEACH, FL ORMOND BEACH, FL 32174 Title: DST Title: () Delete () Change () Addition FOX, SHARLENE S Name: Name: 686 FERNCLIFF DRIVE Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: () Delete Title: (X) Change () Addition SHADDIX, MADELINE E Name: Name: SHADDIX, MADELINE E 686 FERNCLIFF DRIVE Address: Address: **6 HOMAN TERRACE** City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: DAYTONA BEACH, FL 32118

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: STEVEN L. SHADDIX DP 02/12/2008