## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000073692

Entity Name: VOSHARDT/HUMPHREY ARTWORKS, INC.

**FILED** Mar 08, 2008 Secretary of State

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

13213 GULF LANE 200 2ND AVENUE SOUTH

MADEIRA BEACH, FL 33708 US #337

ST PETERSBURG, FL 33701 US

**Current Mailing Address: New Mailing Address:** 

200 2ND AVENUE SOUTH PO BOX 14429

ST PETERSBURG, FL 33733 US #337

ST PETERSBURG, FL 33701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 59-3401421 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:

VOSHARDT, ROBYN A VOSHARDT, ROBYN A 13213 GULF LANE 200 2ND AVENUE SOUTH

MADEIRA BEACH, FL 33708 US #337 ST PETERSBURG, FL 33701 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: 03/08/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

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

Title: VOSHARDT, ROBYN A VOSHARDT, ROBYN A Name: Name: PO BOX 14429 200 2ND AVENUE SOUTH, #337 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33733 City-St-Zip: SAINT PETERSBURG, FL 33701

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

HUMPHREY, SVEN T HUMPHREY, SVEN T Name: Name:

PO BOX 14429 Address: 200 2ND AVENUE SOUTH, #337 Address: SAINT PETERSBURG, FL 33733 SAINT PETERSBURG, FL 33701 City-St-Zip: 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.

Ρ SIGNATURE: ROBYN A VOSHARDT 03/08/2008