

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042066

FILED
Apr 30, 2008
Secretary of State

Entity Name: OUTLAWLESSNESS PRODUCTIONS, INC.

Current Principal Place of Business:

540 SEVENTY-SECOND AVE.
ST. PETE BEACH, FL 33706

New Principal Place of Business:

614 SEVENTY-SECOND AVENUE #4
ST. PETE BEACH, FL 33706

Current Mailing Address:

8095 SHASTA STREET
WEBSTER, FL 33597

New Mailing Address:

614 SEVENTY-SECOND AVENUE #4
ST. PETE BEACH, FL 33706

FEI Number: 59-3575044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

THOMASSON, MARY L PSTD
614 SEVENTY-SECOND AVENUE #4
ST. PETE BEACH, FL 33706 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: MARY L. THOMASSON

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: THOMASSON, MARY L
Address: 540 SEVENTY-SECOND AVE.
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VD (X) Delete
Name: THOMASSON, HUGH E
Address: 8095 SHASTA STREET
City-St-Zip: WEBSTER, FL 33597

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: THOMASSON, MARY L
Address: 614 SEVENTY-SECOND AVENUE #4
City-St-Zip: ST. PETE BEACH, FL 33706

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: MARY L. THOMASSON

PSTD

04/30/2008

Electronic Signature of Signing Officer or Director

Date