

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000073193

1. Entity Name
SHOP & STORE, INC.



Principal Place of Business
222 WEST COMSTOCK AVE., STE. 101
WINTER PARK, FL 32789

Mailing Address
222 WEST COMSTOCK AVE., STE. 101
WINTER PARK, FL 32789



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3597939

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GODBOLD, GENE H
222 WEST COMSTOCK AVE., STE. 101
WINTER PARK, FL 32789

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

U00000840839
03/07/08-80010-004 75.00

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000840839
03/07/08-80010-005 75.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	URRY, STEWART
STREET ADDRESS	ASHLEY CHASE HOUSE
CITY-ST-ZIP	ABBOTSBURY DORSET DT3 4JZ,
TITLE	VP/D
NAME	URRY, PATRICIA M
STREET ADDRESS	ASHLEY CHASE HOUSE
CITY-ST-ZIP	ABBOTSBURY DORSET DT3 4JZ,
TITLE	VPS
NAME	GODBOLD, GENE H
STREET ADDRESS	222 WEST COMSTOCK AVENUE, SUITE 101
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Stewart Urry, President

Date

Daytime Phone #

01.30.08 407/647-4418