

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 499701

FILED
Feb 12, 2010
Secretary of State

Entity Name: FISKE CONCESSIONS, INC.

Current Principal Place of Business:

23 NORTH FLORIDA AVE
BROOKSVILLE, FL 346051177 US

New Principal Place of Business:

Current Mailing Address:

23 NORTH FLORIDA AVE
P O BOX 1177
BROOKSVILLE, FL 346051177 US

New Mailing Address:

FEI Number: 59-1701015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRICE, JERRY LEE
23 NORTH FLORIDA AVENUE
BROOKSVILLE, FL 34601 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: VD
Name: HUMPHREY, MRS BETTY C
Address: 908 CEDAR DRIVE
City-St-Zip: BROOKSVILLE, FL

Title: VD
Name: FISKE, MRS H W
Address: 615 HOWELL AVE
City-St-Zip: BROOKSVILLE, FL

Title: SD
Name: PRICE, GLENDA
Address: 23 N FLORIDA AVE
City-St-Zip: BROOKSVILLE, FL

Title: PD
Name: PRICE, JERRY LEE
Address: 23 N FLORIDA AVENUE
City-St-Zip: BROOKSVILLE, FL

I hereby 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 all other like empowered.

SIGNATURE: GLENDA PRICE

SD

02/12/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date