2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N07000007995

Entity Name: FRED'S SPEAKEASY INC.

Current Principal Place of Business:

229 LEXINGTON DR
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

PO BOX 265785
DAYTONA BEACH, FL 32126

New Mailing Address:

FEI Number: 80-0148259 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEMAREST, LYNNE
229 LEXINGTON DR
DAYTONA BEACH, FL 32114 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DEMAREST, LYNNE
Address: P.O. BOX 265785
City-St-Zip: DAYTONA BEACH, FL 32126

Title: D ( ) Delete
Name: PEDERSON, TERRY
Address: 1127 AUSTRALIA AVE.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete
Name: LOWE, JOHN
Address: 814 N BEACH ST
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNNE DEMAREST P 04/15/2009

Electronic Signature of Signing Officer or Director — Date