

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # 143981

1. Entity Name
WARM MINERAL SPRINGS, INC.



Principal Place of Business
**938 SUNSET DRIVE
VENICE, FL 34285**

Mailing Address
**938 SUNSET DRIVE
VENICE, FL 34285**

DO NOT WRITE IN THIS SPACE



01162008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-0541067

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WHEELER, MARY ALICE
938 SUNSET DR.
VENICE, FL 34285**

**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 reconstating)

DATE _____

**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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WHEELER, MARY ALICE D
STREET ADDRESS	938 SUNSET
CITY-ST-ZIP	VENICE, FL
TITLE	VD
NAME	DALEY, F.M. JR.
STREET ADDRESS	10 MEADOW LANE
CITY-ST-ZIP	HANOVER, NH
TITLE	SD
NAME	GRISSINGER, SUSAN
STREET ADDRESS	1000 CRESTWOOD RD.
CITY-ST-ZIP	ENGLEWOOD, FL
TITLE	D
NAME	DALEY, GERTRUDE S
STREET ADDRESS	10 MEADOW LANE
CITY-ST-ZIP	HANOVER, NH
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000791320
01/23/08-80067-022 150.00

**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

Date

Daytime Phone #

1-16-08

941-488-2553