

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 249862

FILED
Apr 06, 2009
Secretary of State

Entity Name: COLONIAL PANCAKE HOUSE, INC.

Current Principal Place of Business:

951 34TH ST. NORTH
ST. PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

951 34TH ST. NORTH
ST. PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 59-0976257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICE, GERALD STEVEN PD
4336 46TH AVE SO
ST PETERSBURG, FL 33711 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: VSD () Delete
Name: RICE, REBECCA J,
Address: 4175 EAST WITH LACOOCHIE TRAIL
City-St-Zip: DUNNELLON, FL 34434

Title: TD () Delete
Name: RICE, GERALD STEVEN,
Address: 4336 46TH AVE SO
City-St-Zip: ST PETERSBURG, FL 33711

Title: PD () Delete
Name: RICE, GERALD S,
Address: 4336 46TH AVE S
City-St-Zip: ST PETERSBURG, FL 33711

Title: SEC () Delete
Name: RICE, GERALD STEVEN,
Address: 4336 46TH AVE SO
City-St-Zip: ST PETERSBURG, FL 33711

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:

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: GERALD S RICE

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date