## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 626511** 

Entity Name: DEGGELLER AMUSEMENT CO.

4034 SE OLD ST LUCIE BLVD

STUART, FL 349965121 US

Address: City-St-Zip: FILED Mar 19, 2009 Secretary of State

	e. blooti	LEIN WOOLWENT CO.			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	DLD ST. LUCIE FL 34996512				
Current Mailing Address:			New Mailing Address:		
4034 SE OLD ST LUCIE BLVD STUART, FL 34996 51			4034 SE OLD ST. LUCIE BLVD STUART, FL 349965121 US		
FEI Number	: 59-1916887	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
4034 S.E. STUART, The above	ER, EVELYN OLD ST LUCI FL 34996512 named entity e of Florida.	EBLVD. IUS	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DEGGELLER,	) Delete EVELYN MRS ST. LUCIE BLVD. 49965121 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DEGGELLER,	) Delete EVELYN H MRS. ST. LUCIE BLVD. 49965121 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VP ( DESGRANGES	) Delete S, TODD M	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: EVELYN DEGGELLER PRES 03/19/2009