

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F35499

1. Entry Name
THE TROPHY & SHIRT SHOP, INC.



FILED

09 FEB 17 PM 1:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
319 MAGNOLIA AVENUE
MERRITT ISLAND, FL 32952

Mailing Address
319 MAGNOLIA AVENUE
MERRITT ISLAND, FL 32952

2. Principal Place of Business - No PO Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

12162008

Chg-P

CR2E034 (12/06)

4. FEI Number

59-2100497

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUTT, JOAN R.
319 MAGNOLIA AVENUE
MERRITT ISLAND, FL 32952

7. Name and Address of New Registered Agent

Name LINDA J. SPRAGUE
Street Address (P.O. Box Number is Not Acceptable)
790 SUNSET LAKES DR.
City MERRITT ISLAND FL Zip Code 32953

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

Linda J. Sprague

(NOTE: Registered Agent signature required when reinstating)

DATE

1/24/09

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD	☐ Delete
NAME	SPRAGUE, JOHN F	
STREET ADDRESS	790 SUNSET LAKES DR	
CITY-STATE-ZIP	MERRITT ISLAND, FL 32953	
TITLE	PD	☒ Delete
NAME	BUTT, JOAN	
STREET ADDRESS	1364 WILDWOOD WAY	
CITY-STATE-ZIP	ROCKLEDGE, FL	
TITLE	ST	☐ Delete
NAME	SPRAGUE, LINDA J	
STREET ADDRESS	790 SUNSET LAKES DR	
CITY-STATE-ZIP	MERRITT ISLAND, FL 32953	
TITLE	STD	☒ Delete
NAME	REEVES, ANNA BELLE	
STREET ADDRESS	1605 N.BANANA RIVER DR	
CITY-STATE-ZIP	MERRITT ISLAND, FL 00000,	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☒ Change ☐ Addition
NAME	Linda J. Sprague	
STREET ADDRESS	790 Sunset Lakes Dr.	
CITY-STATE-ZIP	MERRITT ISLAND FL 32953	
TITLE	V	☒ Change ☐ Addition
NAME	JOHN F. SPRAGUE IV	
STREET ADDRESS	790 SUNSET LAKES DR.	
CITY-STATE-ZIP	MERRITT ISLAND FL 32953	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

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:

Linda J. Sprague
Linda J. Sprague

1/24/09

Date

321-453-0140

Daytime Phone #