2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005425

Entity Name: SPOONERS SNAPPY TOMATO PIZZA COMPANY

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1758 SE 27 OCALA, FL	7TH LOOP _ 34471 US				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
7230 TURFWAY ROAD FLORENCE, KY 41042 U		US			
FEI Number:	61-1235336	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1200 SOUTPLANTATI	ORATION SYS TH PINE ISLAN ON, FL 33324 named entity s e of Florida.	ID ROAD US	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:					
Election Can		c Signature of Registered Age Trust Fund Contribution ().	ent	Date	
	S AND DIRECT		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () DETERS, CHAR 12561 GREEN F WALTON, KY 4	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DETERS, ERIC 12029 SOUTHR WALTON, KY 4		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () DETERS, JEREI 7230 TURFWAY FLORENCE, KY	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () DETERS, NATH/ 7230 TURFWAY FLORENCE, KY	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MEENACH, DAV 7230 TURFWAY FLORENCE, KY	ROAD	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: JEREMY DETERS PRES 03/19/2009