

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G35609

FILED
Feb 08, 2007
Secretary of State

Entity Name: FLORIDA KEYS WHISTLE STOP, INC.

Current Principal Place of Business:

82685 S. OVERSEAS HWY
P.O. BOX 316
ISLAMORADA, FL 33036

New Principal Place of Business:

82685 S. OVERSEAS HWY
ISLAMORADA, FL 33036

Current Mailing Address:

82685 S. OVERSEAS HWY
P.O. BOX 316
ISLAMORADA, FL 33036

New Mailing Address:

82685 S. OVERSEAS HWY
PO BOX 316
ISLAMORADA, FL 33036

FEI Number: 59-2261633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIGELMYRE MARGARET O
82658 OVERSEAS HWY
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

MARCONI, ROBERT M CPA
10231 PANAMA ST
COOPER CITY, FL 33026 US

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: ROBERT M. MARCONI, CPA

02/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SPIGELMYRE, MARGARET O
Address: 82685 OVERSEAS HWY
City-St-Zip: ISLAMORADA, FL

Title: S () Delete
Name: HELTMAN, ALFRED
Address: 11742 SW 92ND TERRACE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: MORRIS, THOMAS
Address: 7923 SW 161 PLACE
City-St-Zip: MIAMI, FL 33193

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS MORRIS

D

02/08/2007

Electronic Signature of Signing Officer or Director

Date