2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H24705

1. Entity Name

ST. MARY'S SEAFOOD & STEAK HOUSE, INC.



Principal Place of Business

1837 OSBORNE RD. ST. MARYS, GA 31558 Mailing Address

1837 OSBORNE RD. ST. MARYS, GA 31558

FILED May 03, 2007 08:00 A Secretary of State



04302007

No Chg-P

CR2E034 (11/05)

4. FEI Number 58-1586093

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

WILLIAMS, MARGARET M. 11042 PINE ESTATES RD., E. JACKSONVILLE, FL 32218

DO NOT WRITE IN THIS SPACE

5. 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 Squature, typed or printed name of registered agent and tale if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	

OFFICERS AND DIRECTORS 10. TITLE NAME 501 PALMETTO ST. STREET ADDRESS CITY-ST-ZIP. ST, MARYS, GA TITLE WILLIAMS, MARGARET M. NAME STREET ADDRESS 11042 PINE ESTATES RD., E. CITY-ST-ZIP JACKSONVILLE, FL TITLE NAME WILLIAMS, DEBRA 501 PALMETTO ST STREET ADDRESS CITY-ST-ZIP ST MARYS, GA TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

DO NOT WRITE
IN THIS SPACE

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12. Thereby 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

STREET ADDRESS CITY-ST-ZIP

Lift Williams f

David L. Williams Jr.

5-1-07 (912) 882-6875

Date

Daytime Phone #