

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008099

FILED
May 06, 2009
Secretary of State

Entity Name: KREWE OF ANDRES DE PEZ, INC.

Current Principal Place of Business:

213 S. BAYLEN STREET
PENSACOLA, FL 32502

New Principal Place of Business:

900 N. 12TH AVE
PENSACOLA, FL 32501

Current Mailing Address:

P.O. BOX 252
PENSACOLA, FL 325910252

New Mailing Address:

FEI Number: 58-2587196 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COVELL, SCOTT
34990 EMERALD COAST PARKWAY
SUITE 301
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

PRICE, CHRIS
900 N. 12TH AVE
PENSACOLA, FL 32501 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: CHRIS PRICE

05/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRANE, STEPHEN
Address: P.O. BOX 252
City-St-Zip: PENSACOLA, FL 325910252

Title: VP () Delete
Name: ROSS, RYAN
Address: P.O. BOX 252
City-St-Zip: PENSACOLA, FL 325910252

Title: T () Delete
Name: PRICE, CHRIS
Address: P.O. BOX 252
City-St-Zip: PENSACOLA, FL 325910252

Title: D () Delete
Name: LLULL, CARLOS
Address: 1005 FARMINGTON ROAD
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: ABBOTT, TERRY
Address: P.O. BOX 252
City-St-Zip: PENSACOLA, FL 325910252

Title: D () Delete
Name: GUNTHER, FRED
Address: P.O. BOX 252
City-St-Zip: PENSACOLA, FL 325910252

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SPEARS, ED
Address: P.O. BOX 252
City-St-Zip: PENSACOLA, FL 325910252

Title: P (X) Change () Addition
Name: ROSS, RYAN
Address: P.O. BOX 252
City-St-Zip: PENSACOLA, FL 325910252

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS PRICE

T

05/06/2009

Electronic Signature of Signing Officer or Director

Date