

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001695

FILED
Feb 03, 2011
Secretary of State

Entity Name: ST. AUGUSTINE SUNRISE ROTARY RHYTHM AND RIBS FESTIVAL, INC.

Current Principal Place of Business:

50 BRIDGE ST.
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 505
ST. AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 27-2024240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZEICHNER, JEFFREY D
1301 PLANTATION ISLAND DR.
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

ZEICHNER, JEFFREY D
1301 PLANTATION ISLAND DR.
SUITE 205A
ST. AUGUSTINE, FL 32080 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: _____

Electronic Signature of Registered Agent

02/03/2011

Date

OFFICERS AND DIRECTORS:

Title: MR.
Name: BROWN, BRAD
Address: P.O. BOX 505
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: MR.
Name: LITZINGER, MARK
Address: P.O. BOX 505
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: MS.
Name: MUDGETTE, CAROLYN
Address: P.O. BOX 505
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: MR.
Name: ZEICHNER, JEFFREY
Address: P.O. BOX 505
City-St-Zip: ST. AUGUSTINE, FL 32085

I hereby 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 all other like empowered.

SIGNATURE: JEFFREY D. ZEICHNER

MR.

02/03/2011

Electronic Signature of Signing Officer or Director

Date