

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000010249

**Entity Name:** FLORIDA BAY OUTFITTERS, INC.

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

104050 OVERSEAS HIGHWAY  
KEY LARGO, FL 33037 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2513  
KEY LARGO, FL 33037 US

**New Mailing Address:**

**FEI Number:** 65-0974582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WOLL, FRANK  
134 ARCTIC AVE  
TAVERNIER, FL 33070 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: WOLL, FRANK  
Address: 134 ARCTIC AVE  
City-St-Zip: TAVERNIER, FL 33070 US

Title: V  
Name: WOLL, MONICA  
Address: 134 ARCTIC AVE  
City-St-Zip: TAVERNIER, FL 33070 US

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

SIGNATURE: FRANK WOLL

PSTD

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date