

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000046756

FILED
Apr 30, 2008
Secretary of State

Entity Name: MY THREE SONS ICE CREAM, INC.

Current Principal Place of Business:

COUNTRYSIDE MALL, SPACE #2093
27001 US HWY 19 NORTH
CLEARWATER, FL 34621

New Principal Place of Business:

Current Mailing Address:

8368 PARKWOOD BLVD
SEMINOLE, FL 33777

New Mailing Address:

FEI Number: 59-3644935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTLETT, PATRICK
8368 PARKWOOD BOULEVARD
LARGO, FL 33777 US

Name and Address of New Registered Agent:

BARTLETT, PATRICK
8368 PARKWOOD BOULEVARD
SEMINOLE, FL 33777 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: KOCH, WILLIAM
Address: 1722 CHAMPAGNE AVE
City-St-Zip: GULF BREEZE, FL 32563

Title: S () Delete
Name: BARTLETT, ANNETTE
Address: 8368 PARKWOOD BLVD
City-St-Zip: LARGO, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: PATRICK BARTLETT

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date