

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000075866

Entity Name: LOUIE'S LODGE, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

4406 NW 166 AVE
GAINESVILLE, FL 32653

New Principal Place of Business:

4406 NW 166 AVE
GAINESVILLE, FL 326537617 US

Current Mailing Address:

4406 NW 166 AVE
GAINESVILLE, FL 32653

New Mailing Address:

4406 NW 166 AVE
GAINESVILLE, FL 326537617 US

FEI Number: 59-3703291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROUCH, T ALLEN
113 NE 16 AVE
GAINESVILLE, FL 32601 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PATCH, CHERYL S
Address: 6678 CR 214
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D () Delete
Name: CONNOR, THOMAS M
Address: 9320 SW 1 PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: LEGGETT, CANDACE J
Address: 4406 NW 166 AVE
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change () Addition
Name: PATCH, CHERYL S
Address: 6678 CR 214
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: MR (X) Change () Addition
Name: CONNOR, THOMAS M
Address: 9320 SW 1 PLACE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: MS (X) Change () Addition
Name: LEGGETT, CANDACE J
Address: 4406 NW 166 AVE
City-St-Zip: GAINESVILLE, FL 326537617 US

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: CANDACE J. LEGGETT

MS

04/15/2009

Electronic Signature of Signing Officer or Director

Date