

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000090030

Entity Name: OUTLAND KNIFE & CIGARS, INC.

FILED
Jul 07, 2005
Secretary of State

Current Principal Place of Business:

1910 WELLS RD., ORANGE PARK MALL
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

1910 WELLS RD., ORANGE PARK MALL
ORANGE PARK, FL 32073

New Mailing Address:

1910 WELLS ROAD, ORANGE PARK MALL
ORANGE PARK, FL 32073

FEI Number: 58-2575575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST, PAT
1910 WELLS RD., ORANGE PARK MALL
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

WEST, PAT
1910 WELLS ROAD, ORANGE PARK MALL
ORANGE PARK, FL 32073 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:

07/07/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEST, PAT
Address: 7 WATERMILL COURT
City-St-Zip: SAVANNAH, GA 31419

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAT WEST

PRES

07/07/2005

Electronic Signature of Signing Officer or Director

Date