

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000018874

Entity Name: TOPHAT'S SUTLERY, INC.

FILED  
Apr 20, 2007  
Secretary of State

**Current Principal Place of Business:**

1651 KERI ISLAND RD  
NAPLES, FL 34120

**New Principal Place of Business:**

2939 64TH AVE NE  
NAPLES, FL 34120

**Current Mailing Address:**

1651 KERI ISLAND RD  
NAPLES, FL 34120

**New Mailing Address:**

2939 64TH AVE NE  
NAPLES, FL 34120

FEI Number: 59-3698208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SOUTHWEST PROFESSIONAL SERVICES OF SOUTH F  
13571 MCGREGOR BLVD #22  
FT MYERS, FL 33919 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: PD ( ) Delete  
Name: OLSON, REBECCA A  
Address: 1651 KERI ISLAND RD.  
City-St-Zip: NAPLES, FL 34120

Title: VP ( ) Delete  
Name: OLSON, TODD S  
Address: 1651 KERI ISLAND RD.  
City-St-Zip: NAPLES, FL 34120

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: OLSON, REBECCA A  
Address: 2939 64TH AVE NE  
City-St-Zip: NAPLES, FL 34120

Title: VP (X) Change ( ) Addition  
Name: OLSON, TODD S  
Address: 2939 64TH AVE NE  
City-St-Zip: NAPLES, FL 34120

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: REBECCA A. OLSON

Electronic Signature of Signing Officer or Director

PD

04/20/2007

Date