

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000105395

**Entity Name:** MAMALU PARTNERS, INC.

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

214 BRAZILIAN AVE #260  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 2354  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 65-1155090

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SLATER, ROBERT W  
214 BRAZILIAN AVENUE, #260  
PALM BEACH, FL 33480 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:** D  
**Name:** FLYNN, PATRICK H  
**Address:** POST OFFICE BOX 2354  
**City-St-Zip:** PALM BEACH, FL 33480

**Title:** D  
**Name:** FLYNN, PATRICK W  
**Address:** 2600 NORTH FLAGLER DRIVE, #106  
**City-St-Zip:** WEST PALM BEACH, FL 33407

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:** P. H. FLYNN

D

04/12/2012

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

\_\_\_\_\_  
Date