

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051495

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: SARASOTA CROSSINGS SPIRITS, INC.

## Current Principal Place of Business:

5503 FRUITVILLE RD.  
SARASOTA, FL 34232

## New Principal Place of Business:

5403 FRUITVILLE RD.  
SARASOTA, FL 34232

## Current Mailing Address:

5503 FRUITVILLE RD.  
SARASOTA, FL 34232

## New Mailing Address:

5403 FRUITVILLE RD.  
SARASOTA, FL 34232

FEI Number: 03-0455552

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUIVYDAS, ROMAS D  
8395 SHADOW PINE WAY  
SARASOTA, FL 34238 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: P ( ) Delete  
Name: BUIVYDAS, ROMAS D  
Address: 8395 SHADOW PINE WAY  
City-St-Zip: SARASOTA, FL 34238

Title: TD ( ) Delete  
Name: BUIVYDAS, ALDONA M  
Address: 870 CEDARCREST COURT  
City-St-Zip: SARASOTA, FL 34232

Title: VPD ( ) Delete  
Name: RICHARDSON, DAIVA M  
Address: 3458 YONGE AVENUE  
City-St-Zip: SARASOTA, FL 34235

Title: VPS ( ) Delete  
Name: ANDRIRIUNAS, RICHARD  
Address: 7003 43RD E COURT  
City-St-Zip: SARASOTA, FL 34243

Title: VPD ( ) Delete  
Name: JOUNIARI, RUA  
Address: 3144 IRVING STREET  
City-St-Zip: SARASOTA, FL 34237

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: VPD (X) Change ( ) Addition  
Name: JOUNIARI, RUA  
Address: 3144 IRVING STREET  
City-St-Zip: SARASOTA, FL 34237

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: ROMAS BUIVYDAS

P

04/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date