

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000060589

**FILED**  
**Oct 05, 2009**  
**Secretary of State**

**Entity Name:** FAMOUS ENTERTAINMENT SANDESTIN, INC.

**Current Principal Place of Business:**

136 FISHERMANS COVE  
DESTIN, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

136 FISHERMANS COVE  
DESTIN, FL 32550

**New Mailing Address:**

**FEI Number:** 73-1645210

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, TODD  
136 FISHERMANS COVE  
DESTIN, FL 32550 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:** TODD ROBERTS

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** WEHNER, JOHN  
**Address:** 136 FISHERMANS COVE  
**City-St-Zip:** DESTIN, FL 32550

**Title:** ST ( ) Delete  
**Name:** WEHNER, JILL  
**Address:** 136 FISHERMANS COVE  
**City-St-Zip:** DESTIN, FL 32550

**Title:** VP ( ) Delete  
**Name:** ROBERTS, TODD  
**Address:** 136 FISHERMANS COVE  
**City-St-Zip:** DESTIN, FL 32550

**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:**

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:** TODD ROBERTS

Electronic Signature of Signing Officer or Director

VP

10/05/2009

Date