

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086770

Entity Name: TREATS ON THE BEACH, INC.

FILED  
Apr 10, 2009  
Secretary of State

## Current Principal Place of Business:

504 FLAGLER AVE.  
NEW SMYRNA BCH, FL 32169

## New Principal Place of Business:

504 FLAGLER AVE.  
UNIT F  
NEW SMYRNA BCH, FL 32169

## Current Mailing Address:

504 FLAGLER AVE.  
NEW SMYRNA BCH, FL 32169

## New Mailing Address:

504 FLAGLER AVE.  
UNIT F  
NEW SMYRNA BCH, FL 32169

FEI Number: 02-0693267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MUSKEY, ALICE  
506 CORAL TRACE BLVD  
EDGEWATER, FL 32132 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: VP ( ) Delete  
Name: MUSKEY, JESSICA  
Address: 2202 N FAIRFAX RD  
City-St-Zip: ARLINGTON, VA 22201

Title: PT ( ) Delete  
Name: MUSKEY, ALICE  
Address: 506 CORAL TRACE BLVD  
City-St-Zip: EDGEWATER, FL 32132

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALICE MUSKEY

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

Date