

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146994

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: THE HUNGRY TARPON RESTAURANT, INC.

## Current Principal Place of Business:

77522 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036

## New Principal Place of Business:

6800 N.W. 135TH AVENUE  
MORRISTON, FL 32668

## Current Mailing Address:

PO BOX 848  
LONG KEY, FL 33001

## New Mailing Address:

6800 NW 135TH AVE  
MORRISTON, FL 32668

FEI Number: 20-1792252

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PTD ( ) Delete  
Name: BOND, MARY JANE L  
Address: PO BOX 848  
City-St-Zip: LONG KEY, FL 33001

Title: S ( ) Delete  
Name: BOND, MARY JANE  
Address: BOX 848  
City-St-Zip: LONG KEY, FL 33001

Title: T ( ) Delete  
Name: BOND, CHRIS R  
Address: 6800 NW 135TH AVE  
City-St-Zip: MORRISTON, FL 32668

Title: D (X) Delete  
Name: BOND, RICHARD  
Address: 77522 OVERSEAS HWY  
City-St-Zip: ISLARMORDA, FL 33036

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: BOND, JEFFREY S  
Address: 6800 NW 135TH AVE  
City-St-Zip: MORRISTON, FL 32668

Title: S (X) Change ( ) Addition  
Name: BOND, MARY JANE  
Address: 5001 SW 20TH STREET, 8009  
City-St-Zip: OCALA, FL 34474

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: JEFFREY BOND

PRES

01/23/2009

Electronic Signature of Signing Officer or Director

Date