

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000163072

Entity Name: INTERNATIONAL BREW, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

193 N CAUSEWAY  
NEW SMYRNA BEACH, FL 32169

## New Principal Place of Business:

## Current Mailing Address:

193 N CAUSEWAY  
NEW SMYRNA BEACH, FL 32169

## New Mailing Address:

FEI Number: 65-1241928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MUNDELL, G. THEO  
2140 VILLA WAY  
NEW SMYRNA BEACH, FL 32169 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: D ( ) Delete  
Name: MUNDELL, G. THEO  
Address: 2140 VILLA WAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S ( ) Delete  
Name: RAGSDALE, SANDRA  
Address: 1707 N INDIAN RIVER RD  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: RAGSDALE, KENNETH  
Address: 1707 N INDIAN RIVER RD  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP ( ) Delete  
Name: COLVIN, ROBERT  
Address: 105 RIO DEL MAN DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete  
Name: COLVIN, MARYLOU  
Address: 105 RIO DEL MAN DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T (X) Delete  
Name: MARYE, DAVID  
Address: 3403 KUMQUAT DR.  
City-St-Zip: EDGEWATER, FL 32141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MUNDELL, G. THEO  
Address: 2140 VILLA WAY  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: ( ) 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: SANDRA RAGSDALE

S

04/29/2009

Electronic Signature of Signing Officer or Director

Date