

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000168084

1. Entity Name
THUNDER BAY SEAFOOD COMPANY



Principal Place of Business
27602 PINE POINT DRIVE
WESLEY CHAPEL, FL 33543

Mailing Address
27602 PINE POINT DRIVE
WESLEY CHAPEL, FL 33543



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2025798	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLEAKLEY, ROBERT ESQ.
101 E. KENNEDY BLVD., STE. 1100
TAMPA, FL 33602

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS KEY, JONATHAN D. 27602 PINE POINT DRIVE WESLEY CHAPEL, FL 33543
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRIAN, DUNN P 420 LOS ALTOS AVE LONG BEACH, CA 90814
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

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01/18/06-80039-021 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jonathan Key

Date

Daytime Phone #

1-11-6 (813) 994-1310