

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000017383

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: CRACKER HOUSE SALOON, INC.

## Current Principal Place of Business:

2791 E IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34744 US

## New Principal Place of Business:

4151 O'BERRY ROAD  
KISSIMMEE, FL 34746 US

## Current Mailing Address:

4151 O'BERRY ROAD  
KISSIMMEE, FL 34746

## New Mailing Address:

4151 O'BERRY ROAD  
KISSIMMEE, FL 34746 US

FEI Number: 20-2277276

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KILMER, SCOTT  
2791 E. IRLO BRONSON MEMORIAL HWY.  
KISSIMMEE, FL 34744 US

## Name and Address of New Registered Agent:

KILMER, SCOTT  
4151 O'BERRY ROAD  
KISSIMMEE, FL 34746 US

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:

03/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVPD ( ) Delete  
Name: KILMER, SCOTT  
Address: 4151 O'BERRY ROAD  
City-St-Zip: KISSIMMEE, FL 34746

Title: STD ( ) Delete  
Name: KILMER, TRACY  
Address: 4151 O'BERRY ROAD  
City-St-Zip: KISSIMMEE, FL 34746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPD (X) Change ( ) Addition  
Name: KILMER, SCOTT D I  
Address: 4151 O'BERRY ROAD  
City-St-Zip: KISSIMMEE, FL 34746

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: TRACY KILMER

STD

03/16/2009

Electronic Signature of Signing Officer or Director

Date