

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000103570

Entity Name: ST JOHNS COUNTY LIQUORS, INC.

FILED
Oct 09, 2006
Secretary of State

Current Principal Place of Business:

17589 HOLLY OAK AVE
FT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

17589 HOLLY OAK AVE
FT MYERS, FL 33912

New Mailing Address:

FEI Number: 57-1222664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KALI, OLGA
17589 HOLLY OAK AVE
FT MYERS, FL 33912 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KALI, OLGA
Address: 17589 HOLLY OAK AVE
City-St-Zip: FT MYERS, FL 33912

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: KALI, JOZSEF
Address: 17589 HOLLY OAK AVE.
City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the 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: OLGA KALI

D

10/09/2006

Electronic Signature of Signing Officer or Director

Date