2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106062

Entity Name: OLDE COLONIAL HAVANA CIGAR COMPANY, INC.

FILED Jan 17, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
625 BREVARD COCOA, FL 329227807						
Current Mailing Address:			New Maili	New Mailing Address:		
625 BREVARD AVE COCOA, FL 329227807						
FEI Number:	42-1675762	FEI Number Applied For () FEI N	lumber Not Appl	plicable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
TRINKLE, RONALD L 3875 HAMMOCK ROAD MIMS, FL 32754 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:						
	Electron	ic Signature of Registered Agent		Date		
Election Carr	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () SALIS, GEORG 2560 REDMAPL MELBOURNE, F	E PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	CRAWFORD, E 621 HEATHER S		Title: Name: Address: City-St-Zip:	CEOD (X) Change () Addition CRAWFORD, EUGINE 621 HEATHER STONE DR MERRITT ISLAND, FL 32953 US		
Title: Name: Address: City-St-Zip:	VD () TRINKLE, RONA 3875 HAMMOCI MIMS, FL 3275	K RD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S () SCHROEDER, N 2111 CLAIRMOI COCOA, FL 32	NT DR	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition SCHROEDER, WILLIAML 2111 CLAIRMONT DR COCOA, FL 32922		
Title: Name: Address: City-St-Zip:	CFO () STRICKLAND, J 2090 N. TROPIC MERRITT ISLAN	CAL TRAIL	Title: Name: Address: City-St-Zip:	CFOD (X) Change () Addition STRICKLAND, JAMES A JR 2090 N. TROPICAL TRAIL MERRITT ISLAND, FL 32953		
Title: Name: Address: City-St-Zip:	TCD () ASHMAN, RAYM 3416 ROCKY G COCOA, FL 32	AP PLACE	Title: Name: Address: City-St-Zip:	CD (X) Change () Addition ASHMAN, RAYMOND C 3416 ROCKY GAP PLACE COCOA, FL 32926		

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: RAYMOND C ASHMAN CD 01/17/2009