2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123488

THE WINE SHOP OF ST. PETERSBURG BEACH, INC.

FILED Apr 29, 2008 Secretary of State

Entity Name: THE WINE SHOP OF ST. PETERSBURG BE	EACH, INC		
Current Principal Place of Business:	New Principal Place o	of Business:	
401 COREY AVE ST. PETERSBURG, FL 33706			
Current Mailing Address:	New Mailing Address	:	
401 COREY AVE ST. PETERSBURG, FL 33706			
FEI Number: 20-3443263 FEI Number Applied For () FEI	Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
GARRY L. BRADY 251 CLEARWATER LARGO RD LARGO, FL 33770 US			
The above named entity submits this statement for the purposin the State of Florida.	se of changing its registered	office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: P () Delete Name: MARSHALL, MARC Address: 5501 GULF BLVD	Title: P Name: BRADY, GAR Address: 1600 GULF		

ST. PETERSBURG BCH, FL 33706 CLEARWATER, FL 33767 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition MARSHALL, COLEEN BRADY, GARRY Name: Name: Address: 251 CLEARWATER LARGO RD Address: 1600 GULF BLVD #212 LARGO, FL 33770 CLEARWATER, FL 33767 City-St-Zip: City-St-Zip:

Title: S/T (X) Delete Title: () Change () Addition Name: MARSHALL, COLEEN H Name:

 Name:
 MARSHALL, COLEEN H
 Name:

 Address:
 251 CLEARWATER LARGO RD
 Address:

 City-St-Zip:
 LARGO, FL 33770
 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: COLEEN MARSHALL S/T 04/29/2008