2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056511

FILED Mar 27, 2008 Secretary of State

Entity Name: TUMULO CAJUN FOOD SERVICE, INC. **Current Principal Place of Business: New Principal Place of Business:** 138 FISHERMAN'S COVE 110 CANNERY LANE DESTIN, FL 32550 US MIRAMAR BEACH, FL 32550 US **Current Mailing Address: New Mailing Address:** 138 FISHERMAN'S COVE 110 CANNERY LANE DESTIN, FL 32550 MIRAMAR BEACH, FL 32550 US FEI Number: 20-4729785 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: PLEAT, DAVID B 4477 LÉGENDARY DRIVE SUITE 202 DESTIN, FL 32541 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition TUSA, ANTHONY J JR. TUSA, ANTHONY J JR. Name: Name:

4730 PAPAYA PARK

DESTIN, FL 32541 US

City-St-Zip:

Address: City-St-Zip:

4220 JADE LOOP 404 KELLY PLANTATION DR Address: Address: City-St-Zip: DESTIN, FL 32541 US City-St-Zip: DESTIN, FL 32541 US Title: Title: () Delete (X) Change () Addition Name: MURDOCK, JERRY Name: MURDOCK, JERRY Address:

502 OSCEOLA DRIVE 441 CAPTAIN'S CIRCLE Address: DESTIN, FL 32541 US DESTIN, FL 32541 US City-St-Zip:

() Delete Title: Title: () Change () Addition LOPP, ROBERT A Name:

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: ELIZABETH BROWN MRS 03/27/2008