

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000114747

1. Entity Name
BUMBINO'S ITALIAN RESTURANTE INC.



Principal Place of Business

3 ROSEDOWN BLVD.
DEBARY, FL 32713

Mailing Address

3 ROSEDOWN BLVD.
DEBARY, FL 32713



01162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-5559999

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARDNER, THERESA
3 ROSEDOWN BLVD
DEBARY, FL 32713

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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES
GARDNER, THERESA
3 ROSEDOWN BLVD
DEBARY, FL 32713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
FRETWELL, WILLIAM JR.
3 ROSEDOWN BLVD
DEBARY, FL 32713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SEC
PIERCE, DON F
3 ROSEDOWN BLVD.
DEBARY, FL 32713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREA
GARDNER, THERESA
3 ROSEDOWN BLVD.
DEBARY, FL 32713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR
GARDNER, THERESA
3 ROSEDOWN BLVD.
DEBARY, FL 32713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000793139
01/24/08-80038-004 150.00

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Theresa Gardner Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/08
Date

386 801 9912
Daytime Phone #