

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010610

FILED
May 01, 2009
Secretary of State

Entity Name: OLGA'S BIRD PARADISE, INC.

Current Principal Place of Business:

4479 FT ADAMS AVE
LA BELLE, FL 33935 US

New Principal Place of Business:

1800 CASE LN
NORTH FORT MYERS, FL 33917 US

Current Mailing Address:

4479 FT ADAMS AVE
LA BELLE, FL 33935 US

New Mailing Address:

1800 CASE LN
NORTH FORT MYERS, FL 33917 US

FEI Number: 20-8319949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, OLGA
4479 FT ADAMS AVE
LA BELLE, FL 33935 US

Name and Address of New Registered Agent:

STANTON, OLGA
1800 CASE LN
NORTH FORT MYERS, FL 33917 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:

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: STANTON, OLGA
Address: 4479 FT ADAMS AVE
City-St-Zip: LA BELLE, FL 33935 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: STANTON, OLGA
Address: 1800 CASE
City-St-Zip: NORT FORT MYERS, FL 33917 US

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: OS

MS

05/01/2009

Electronic Signature of Signing Officer or Director

Date