

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000016994

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: PINCHER'S BEACH BAR & GRILL INC

## Current Principal Place of Business:

18148 CUTLASS DR  
FT MYERS BEACH, FL 33931 US

## New Principal Place of Business:

6890 ESTERO BLVD  
FT MYERS BEACH, FL 34231 US

## Current Mailing Address:

18148 CUTLASS DR  
FT MYERS, FL 33931 US

## New Mailing Address:

28089 VANDERBILT DR  
SUITE 102  
BONITA SPRINGS, FL 34134 US

FEI Number: 20-8401141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PHELAN, GRANT L  
18148 CUTLASS DR  
FT MYERS BEACH, FL 33931 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: PHELAN, ANTHONY L  
Address: 18148 CUTLASS DR  
City-St-Zip: FT MYERS BEACH, FL 33931 US

Title: VP ( ) Delete  
Name: PHELAN, GRANT L  
Address: 18148 CUTLASS DR  
City-St-Zip: FT MYERS BEACH, FL 33931 US

Title: S ( ) Delete  
Name: PHELAN, KATHLEEN  
Address: 18148 CUTLASS DR  
City-St-Zip: FT MYERS BEACH, FL 33931 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
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: GRANT PHELAN

VP

04/14/2009

Electronic Signature of Signing Officer or Director

Date