

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000064573

Entity Name: RED WHISKEY, INC

FILED
Apr 13, 2009
Secretary of State

Current Principal Place of Business:

3730 CLEVELAND HEIGHTS BLVD
SUITE 2
LAKELAND, FL 33803 US

New Principal Place of Business:

4310 S FLORIDA AVENUE
LAKELAND, FL 33813 US

Current Mailing Address:

3730 CLEVELAND HEIGHTS BLVD
SUITE 2
LAKELAND, FL 33803 US

New Mailing Address:

4310 S FLORIDA AVENUE
LAKELAND, FL 33813 US

FEI Number: 26-0273786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, BART
3730 CLEVELAND HEIGHTS BLVD
SUITE 2
LAKELAND, FL 33083 US

Name and Address of New Registered Agent:

ROSS, BART
4310 S FLORIDA AVENUE
LAKELAND, FL 33813 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: BART ROSS

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,S () Delete
Name: ROSS, BART
Address: 3730 CLEVELAND HEIGHTS BLVD, SUITE 2
City-St-Zip: LAKELAND, FL 33803 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: ROSS, BART
Address: 4310 S FLORIDA AVENUE
City-St-Zip: LAKELAND, FL 33813 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: BART ROSS

P.S

04/13/2009

Electronic Signature of Signing Officer or Director

Date