

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000030905

Entity Name: BUNKY'S RAW BAR, INC.

FILED
Jun 28, 2009
Secretary of State

Current Principal Place of Business:

1390 HIGHWAY A1A
SATELLITE BEACH, FL 32937

New Principal Place of Business:

2372 N. HIGHWAY A1A
INDIALANTIC, FL 32903

Current Mailing Address:

1390 HIGHWAY A1A
SATELLITE BEACH, FL 32937

New Mailing Address:

P.O. BOX 372341
SATELLITE BEACH, FL 32937

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALONE, DEBRA
1390 HIGHWAY A1A
SATELLITE BEACH, FL 32937 US

Name and Address of New Registered Agent:

MALONE, DEBRA
771 LOGGERHEAD ISLAND WAY
SATELLITE BEACH, FL 32937 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: DEBRA MALONE

06/28/2009

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: PD () Delete
Name: MALONE, MICHAEL
Address: 120 SAN REMO DRIVE
City-St-Zip: ISLAMORADA, FL 33036

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MALONE, MICHAEL
Address: P.O. BOX 372341
City-St-Zip: SATELLITE BEACH, FL 32937

Title: VP () Change (X) Addition
Name: MALONE, MICHAEL
Address: PO BOX 372341
City-St-Zip: SATELLITE BEACH, FL 32937

Title: SD () Change (X) Addition
Name: MALONE, MICHAEL
Address: PO BOX 372341
City-St-Zip: SATELLITE BEACH, FL 32937

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: MICHAEL MALONE

PD

06/28/2009

Electronic Signature of Signing Officer or Director

Date