

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000082199

FILED  
Sep 15, 2009  
Secretary of State

Entity Name: SOUTH STREET ICE CREAM INC

## Current Principal Place of Business:

507 SOUTH ST  
KEY WEST, FL 33040 US

## New Principal Place of Business:

137 DUVAL ST  
KEY WEST, FL 33040 US

## Current Mailing Address:

PO BOX 1805  
ISLAMORADA, FL 33036 US

## New Mailing Address:

FEI Number: 26-3269188      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GILLES, FUMAT M  
81197 OVERSEAS HWY  
ISLAMORADA, FL 33036 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: POSTON, NICOLE M  
Address: 77 SEASIDE NORTH COURT  
City-St-Zip: KEY WEST, FL 33040

Title: SEC ( ) Delete  
Name: GILLES, FUMAT M  
Address: 81197 OVERSEAS HWY  
City-St-Zip: ISLAMORADA, FL 33036

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: POSTON, NICOLE M  
Address: 137 DUVAL ST  
City-St-Zip: KEY WEST, FL 33040

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: GILLES FUMAT

SEC

09/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date