

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000099951

FILED
Oct 05, 2009
Secretary of State**Entity Name:** HANCOCK BRIDGE RESTAURANT, INC.**Current Principal Place of Business:**3448 MARINATOWN LN
NORTH FORT MYERS, FL 33903**New Principal Place of Business:****Current Mailing Address:**3448 MARINATOWN LN
NORTH FORT MYERS, FL 33903**New Mailing Address:****FEI Number:** 26-0370752**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MCCARTHY, BRENDA
3448 MARINATOWN LN.
NORTH FORT MYERS, FL 33903 US**Name and Address of New Registered Agent:**PIERROT, WALTER
3448 MARINATOWN LN.
NORTH FORT MYERS, FL 33903 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: WALTER PIERROT

10/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCARTHY, BRENDA
Address: 3448 MARINATOWN LN
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: DIR (X) Delete
Name: WOGGON, TORSTEN
Address: 3454 HANCOCK BRIDGE PKWY
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: V P (X) Delete
Name: KORF, MARK
Address: 3448 MARINATOWN LANE
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PIERROT, WALTER
Address: 3448 MARINATOWN LN
City-St-Zip: NORTH FORT MYERS, FL 33903

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: WALTER PIERROT

P

10/05/2009

Electronic Signature of Signing Officer or Director

Date