

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009898

FILED
Mar 26, 2009
Secretary of State

Entity Name: WHIP N SPUR CATALOG & TACK SHOP INC.

Current Principal Place of Business:

14434 N. DALE MABRY
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

14434 N. DALE MABRY
TAMPA, FL 33618 US

New Mailing Address:

FEI Number: 59-3269736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'KEEFFE, MARY ANN
12307 TWIN BRANCH ACRES
TAMPA, FL 33626 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: VPS () Delete
Name: MYHRE, BERNADETTE T
Address: 26733 FIELDS FARM LANE
City-St-Zip: DADE CITY, FL 33525

Title: VP () Delete
Name: O'KEEFFE, SHAN P
Address: 7527 DOVE VALLEY DRIVE
City-St-Zip: BELLEVUE, TN 37221

Title: PT () Delete
Name: O'KEEFFE, MARY ANN
Address: 12307 TWIN BRANCH ACRES
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: O'KEEFFE, SHAN
Address: 12307 TWIN BRANCH ACRES
City-St-Zip: TAMPA, FL 33626

Title: VP () Delete
Name: O'KEEFFE, ANDREAS B
Address: 12307 TWIN BRANCH ACRES
City-St-Zip: TAMPA, FL 33626

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:

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: MARYANN O'KEEFFE

PT

03/26/2009

Electronic Signature of Signing Officer or Director

Date