

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000000539

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: DEXTER'S OF THORNTON PARK, INC.

## Current Principal Place of Business:

808 E WASHINGTON ST  
ORLANDO, FL 32803

## New Principal Place of Business:

## Current Mailing Address:

558 W NEW ENGLAND AVENUE  
WINTER PARK, FL 32789

## New Mailing Address:

FEI Number: 59-3290923

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RICHARDSON, DEXTER  
808 E WASHINGTON ST  
ORLANDO, FL 32803 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: PD ( ) Delete  
Name: RICHARDSON, DEXTER  
Address: 1590 HIGHLAND RD  
City-St-Zip: WINTER PARK, FL 32789

Title: SD ( ) Delete  
Name: MANN, ADRIAN H  
Address: 10245 CHESHAM DR  
City-St-Zip: ORLANDO, FL 32817

Title: TD ( ) Delete  
Name: HOFFMEISTER, JOHN B  
Address: 522 TWISTING PINE COURT  
City-St-Zip: LONGWOOD, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: MANN, ADRIAN H  
Address: 1808 JILL COURT  
City-St-Zip: WINTER PARK, FL 32789

Title: TD (X) Change ( ) Addition  
Name: HOFFMEISTER, JOHN B  
Address: 438 TIMBER RIDGE DRIVE  
City-St-Zip: LONGWOOD, FL 32779

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: DEXTER RICHARDSON

PD

03/24/2009

Electronic Signature of Signing Officer or Director

Date