

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 11, 2008 08:00 AM  
Secretary of State

DOCUMENT # P96000099579

1. Entity Name

PETE'S PATIO & FURNITURE OUTLET, INC.



Principal Place of Business

3031 PLACIDA RD., STE. 11 & 12  
ENGLEWOOD FL 34224

Mailing Address

3031 PLACIDA RD., STE. 11 & 12  
ENGLEWOOD FL 34224



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number 65-0722191

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARMBRUST, PETER  
10 MEDALIST WAY  
ROTONDA WEST FL 33947

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPT ☐ Delete  
NAME ARMBRUST, PETER G  
STREET ADDRESS 3031 PLACIDE RD., STE. 11 & 12  
CITY- ST- ZIP ENGLEWOOD FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 000000822823  
CITY- ST- ZIP 02/20/08-80014-012 1501.00

TITLE DVP ☐ Delete  
NAME ARMBRUST, DONALD G  
STREET ADDRESS 265 NARRAGANSETT BAY AVE.  
CITY- ST- ZIP WARWICK RI 02889

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE DS ☐ Delete  
NAME ARMBRUST, NORMA JEAN  
STREET ADDRESS 265 NARRAGANSETT BAY AVE.  
CITY- ST- ZIP WARWICK RI 02889

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
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CITY- ST- ZIP

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CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Peter G. Armburst*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-08

941 697 2500

Date

Daytime Phone #