

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027376

Entity Name: STEINHATCHEE RIVER INN, INC.

FILED  
Mar 27, 2009  
Secretary of State

## Current Principal Place of Business:

1111 RIVERSIDE DR HWY 51 N  
STEINHATCHEE, FL 32359

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 828  
STEINHATCHEE, FL 32359

## New Mailing Address:

FEI Number: 59-3450802

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOWLER, LORETTA  
1111 RIVERSIDE DR.  
STEINHATCHEE, FL 32359 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: FOWLER, LORETTA  
Address: 1111 RIVERSIDE DR. HWY 51 N  
City-St-Zip: STEINHATCHEE, FL 32359

Title: ST ( ) Delete  
Name: FOWLER, LORETTA  
Address: 1604 3RD AVE  
City-St-Zip: STEINHATCHEE, FL 32359

Title: VP ( ) Delete  
Name: FOWLER, DEAN  
Address: 1604 3RD AVE  
City-St-Zip: STEINHATCHEE, FL 32359

## 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:

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: LORETTA FOWLER

PRES

03/27/2009

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

\_\_\_\_\_  
Date