

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000027376

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** STEINHATCHEE RIVER INN, INC.

**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

**OFFICERS AND DIRECTORS:**

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

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

**Title:** VP  
**Name:** JOHNSON, EILEEN  
**Address:** 1604 3RD AVE  
**City-St-Zip:** STEINHATCHEE, FL 32359

I hereby 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 all other like empowered.

**SIGNATURE:** LORETTA FOWLER

P

01/27/2011

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

\_\_\_\_\_  
Date