## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000032547

Entity Name: MAYFAIR WET WILLIES, INC.

FILED Jan 22, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3390 MARY STREET MIAMI, FL 331330 **Current Mailing Address: New Mailing Address:** P.O. BOX 60127 SAVANNAH, GA 31420 FEI Number: 65-0759306 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOCK, RONALD G 200 E. ROBINSON ST., STE, 1150 ORLANDO, FL 328011962 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition STERN, ROBERT N Name: Name: 1800 KALURNA CT. Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: Title: Title: () Delete () Change () Addition DICKINSON, FRED I Name: Name: 60 HARVEY AVE. Address: Address: PARAMUS, NJ 07652 City-St-Zip: City-St-Zip: Title: ( ) Delete Title: () Change () Addition DICKINSON, WILLIAM A Name: Name: 106 DUTCH ISLAND DR. Address: Address: City-St-Zip: SAVANNAH, GA 31406 City-St-Zip: Title: ( ) Delete Title: () Change () Addition STACHEL, ERIC S Name: Name: Address: 2845 LOOKOUT PL Address: City-St-Zip: SAVANNAH, GA 30305 City-St-Zip: Title: Title: () Delete () Change () Addition STACHEL, DAVID A Name: Name: 11 ISLAND AVE., #P.H. 2 Address: Address:

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.

City-St-Zip:

SIGNATURE: WILLIAM A. DICKINSON D 01/22/2008

City-St-Zip:

MIAMI BEACH, FL 33139