2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000037454

City-St-Zip:

TAVARES, FL 32778

Entity Name: CHOCTAW WILLY'S, INC.

FILED Apr 05, 2007 Secretary of State

		to voice of invo.			
Current Principal Place of Business:			New Principal Place of Business:		
	ROAD STREET AND, FL 34736				
Current Mailing Address:			New Mailing Address:		
	IRLEY SHORE 5, FL 32778	S ROAD			
FEI Number: 59-3448742 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:		
29031 SHI	PAULETTE B IRLEY SHORE 5, FL 32778	S ROAD US			
The above in the State	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BIRD, DOUGLA	RRY ISLE WAY	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BROCK, PAUL	Y SHORES ROAD	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	BROCK, STAN) Delete LEY D Y SHORES ROAD	Title: (Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: PAULETTE B BROCK ST 04/05/2007