

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000037454

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: CHOCTAW WILLY'S, INC.

**Current Principal Place of Business:**

214 W. BROAD STREET  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

29031 SHIRLEY SHORES ROAD  
TAVARES, FL 32778

**New Mailing Address:**

FEI Number: 59-3448742      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROCK, PAULETTE B  
29031 SHIRLEY SHORES ROAD  
TAVARES, FL 32778      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: BIRD, DOUGLAS  
Address: 1865 CRANBERRY ISLE WAY  
City-St-Zip: APOPKA, FL 32712

Title: ST ( ) Delete  
Name: BROCK, PAULETTE B  
Address: 29031 SHIRLEY SHORES ROAD  
City-St-Zip: TAVARES, FL 32778

Title: VP ( ) Delete  
Name: BROCK, STANLEY D  
Address: 29031 SHIRLEY SHORES ROAD  
City-St-Zip: TAVARES, FL 32778

**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: DOUGLAS BIRD

P

03/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date