

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P97000069563

**FILED**  
**Sep 21, 2012**  
**Secretary of State**

**Entity Name:** THE "DAM" SMOKER CATERING SERVICE, INC.

**Current Principal Place of Business:**

THE DAM SMOKER CATERING SERVICE INC.  
36721 COUNTY RD. 19A  
EUSTIS, FL 32726

**New Principal Place of Business:**

**Current Mailing Address:**

GENE SIMMONS  
24846 LEONARD WAY  
EUSTIS, FL 32736

**New Mailing Address:**

**FEI Number:** 59-3476655      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SIMMONS, GENE PRES.  
24846 LEONARD WAY  
EUSTIS, FL 32736 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: PT  
Name: SIMMONS, GENE  
Address: 24846 LEONARD WAY  
City-St-Zip: EUSTIS, FL 32736

Title: VPT  
Name: NEAL, JENNIFER VPT  
Address: 3319 SITE TO SEE  
City-St-Zip: EUSTIS, FL 32726

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: GENE SIMMONS

PT.

09/21/2012

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

\_\_\_\_\_  
Date