

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000076099

Entity Name: SHARPS DISCOUNT LIQUORS, INC.

FILED  
Jun 25, 2009  
Secretary of State

## Current Principal Place of Business:

103 FLAGLER PLAZA DR.  
PALM COAST, FL 32137

## New Principal Place of Business:

## Current Mailing Address:

103 FLAGLER PLAZA DR.  
PALM COAST, FL 32137

## New Mailing Address:

FEI Number: 59-3465219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KATZ, B. PAUL  
ATRIUM STE., 1 FLORIDA PARK DR., S.  
PALM COAST, FL 32137 US

## Name and Address of New Registered Agent:

KATZ, B. PAUL  
1 FLORIDA PARK DR., S.  
ATRIUM SUITE  
PALM COAST, FL 32137 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

06/25/2009

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: SHARPS, SCOTT  
Address: 7 HUNTSMAN LOOK  
City-St-Zip: ORMOND BEACH, FL 32174

Title: PST ( ) Delete  
Name: SHARPS, WAYNE  
Address: 7 HUNTSMAN LOOK  
City-St-Zip: ORMOND BEACH, FL 32174

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WAYNE SHARPS

Electronic Signature of Signing Officer or Director

PST

06/25/2009

Date