2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000017037

Entity Name: FAY'S PALM BEACH CHEESECAKE CO.

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1253 OLD OKEECHOBEE ROAD 2400 SE VETERANS MEMORIAL PARKWAY

UNIT A1 SUITE 206

WEST PALM BEACH, FL 33401 PORT ST. LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

1253 OLD OKEECHOBEE ROAD PO BOX 16395

UNIT A1 WEST PALM BEACH, FL 33416 WEST PALM BEACH, FL 33401

FEI Number: 65-0815227 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:

DAVIS, EILEEN N

1253 OKEECHOBEE RD.

BARRY M. DEETS, PA
2400 SE VETERANS MEMORIAL PARKWAY

WEST PALM BEACH, FL 33401 US SUITE 206
PORT ST. LUCIE, FL 34952 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: BARRY M DEETS 04/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

 Name:
 DAVIS, EILEEN N
 Name:
 DAVIS, EILEEN N

 Address:
 1253 OLD OKEECHOBEE RD, UNIT A1
 Address:
 PO BOX 16395

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33416

Title: VSD () Delete Title: VSD (X) Change () Addition

 Name:
 DAVIS, ROBERT P
 Name:
 DAVIS, ROBERT P

 Address:
 1253 OLD OKEECHOBEE RD, UNIT A1
 Address:
 PO BOX 16395

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33416

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: EILEEN N. DAVIS P 04/02/2009