

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000034755

FILED  
Apr 22, 2012  
Secretary of State

**Entity Name:** SCOOTER'S, FUN, FOOD, + SPIRITS, INC.

**Current Principal Place of Business:**

8913 SE BRIDGE RD.  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

**Current Mailing Address:**

8913 SE BRIDGE RD.  
HOBE SOUND, FL 33455

**New Mailing Address:**

**FEI Number:** 65-0829473

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAPLIN, EDWARD R  
829 ANCHORAGE DR.  
N. PALM BCH, FL 33408 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: P  
Name: CHAPLIN, EDWARD R  
Address: 829 ANCHORAGE DR  
City-St-Zip: N PALM BCH, FL 33455

Title: VP  
Name: CHAPLIN, TREVA L  
Address: 829 ANCHORAGE DR  
City-St-Zip: N PALM BCH, FL 33455

Title: S  
Name: CHAPLIN, TREVA L  
Address: 829 ANCHORAGE DR  
City-St-Zip: N PALM BCH, FL 33455

Title: T  
Name: CHAPLIN, EDWARD R  
Address: 829 ANCHORAGE DR  
City-St-Zip: N PALM BCH, FL 33455

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: EDWARD R CHAPLIN

PRES

04/22/2012

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

\_\_\_\_\_  
Date