

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000095212

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** PINCHERS CRAB SHACK OF BONITA SPRINGS, INC.

**Current Principal Place of Business:**

28580 BONITA CROSSINGS BLVD  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

**Current Mailing Address:**

28089 VANDERBILT DR  
SUITE # 102  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

**FEI Number:** 59-3593985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHELAN, KATHLEEN M  
18148 CUTLASS DRIVE  
FORT MYERS BEACH, FL 33931 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: PVD  
Name: PHELAN, ANTHONY L  
Address: 18148 CUTLASS DRIVE  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: STD  
Name: PHELAN, KATHLEEN  
Address: 18148 CUTLASS DRIVE  
City-St-Zip: FORT MYERS BEACH, FL 33931

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: KATHLEEN PHELAN

STD

03/17/2011

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

\_\_\_\_\_  
Date