

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025556

Entity Name: LITTLE RIVER LODGE, INC.

FILED  
Jan 17, 2008  
Secretary of State

**Current Principal Place of Business:**

#1 BUCK PHILLIPS ROAD  
LITTLE RIVER, AL 36550

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 18725  
PENSACOLA, FL 325238725

**New Mailing Address:**

FEI Number: 58-2459186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FITE, DONNA L  
163 LEPORT DRIVE  
PENSACOLA BEACH, FL 32561 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FITE, DONNA L  
Address: 163 LEPORT DRIVE  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: D ( ) Delete  
Name: UPCHURCH, JUDITH  
Address: 3751 INDUSTRIAL PARK DRIVE  
City-St-Zip: MOBILE, AL 36693

**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: DONNA FITE

VP

01/17/2008

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

\_\_\_\_\_ Date