

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090670

FILED  
Jul 08, 2009  
Secretary of State

Entity Name: DOUGH BALLS MALLORY SQUARE, INC.

## Current Principal Place of Business:

CABLE HOUSE-MALLORY SQUARE  
MALLORY SQUARE  
KEY WEST, FL 33041

## New Principal Place of Business:

## Current Mailing Address:

25 ARBUTUS DRIVE  
KEY WEST, FL 33040

## New Mailing Address:

127 W. FAIBANKS AVE  
PMB 529  
WINTERPARK, FL 32789

FEI Number: 65-0948609

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIMBERLING, GARYANNE  
25 ARBUTUS DRIVE  
KEY WEST, FL 33040 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

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: PVS ( ) Delete  
Name: JIGARJIAN, EDWARD N  
Address: 25 ARBUTUS DRIVE  
City-St-Zip: KEY WEST, FL 33040

Title: TD ( ) Delete  
Name: JIGARJIAN, EDWARD N  
Address: 25RBUTUS DRIVE  
City-St-Zip: KEY WEST, FL 33040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVS (X) Change ( ) Addition  
Name: JIGARJIAN, EDWARD N  
Address: 127 W. FAIBANKS AVE PMB 529  
City-St-Zip: WINTER PARK, FL 32789

Title: TD (X) Change ( ) Addition  
Name: JIGARJIAN, EDWARD N  
Address: 127 W. FAIBANKS AVE  
City-St-Zip: WINTER PARK, FL 32789

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: EDWARD JIGARJIAN

PRES

07/08/2009

Electronic Signature of Signing Officer or Director

Date