2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P99000103594

Entity Name: ST. PETERSBURG WET WILLIES, INC.

Current Principal Place of Business:

BAY WALK #A208
ST. PETERSBURG, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 60127
SAVANANNAH, GA 31420

New Mailing Address:

FEI Number: 59-3620541 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/P ( ) Delete
Name: STERN, ROBERT N
Address: 2141 W CHURCH ST
City-St-Zip: ORLANDO, FL 32805

Title: DST ( ) Delete
Name: DICKINSON, WILLIAM A
Address: 106 DUTCH ISLAND DRIVE
City-St-Zip: SAVANNAH, GA 31406

Title: D/VP ( ) Delete
Name: STACHEL, DAVID A
Address: 11 ISLAND AVENUE, PH2
City-St-Zip: MIAMI BEACH, FL 33139

Title: D/VP ( ) Delete
Name: STACHEL, ERIC S
Address: 2845 LOOKOUT PLACE
City-St-Zip: ATLANTA, GA 30305

Title: D/VP ( ) Delete
Name: DICKINSON, FRED J
Address: 60 HARVEY DRIVE
City-St-Zip: PARAMUS, NJ 07652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: WILLIAM DICKINSON DST 04/30/2009

Electronic Signature of Signing Officer or Director Date