## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S29213

Title:

Name:

Address:

City-St-Zip:

Entity Name: HOOTERS OF WELLS STREET, INC.

FILED Apr 16, 2008 Secretary of State

y	iei nooreko	OF WELLO OF KEET, IIVO.			
Current Principal Place of Business:			New Principal Place of Business:		
STE 200	TON ROAD				
CLEARWA	TER, FL 33759	US			
Current Mailing Address:			New Mailing Address:		
107 HAMP <sup>1</sup> STE 200	TON ROAD				
CLEARWA	TER, FL 33759	US			
FEI Number:	59-3060381	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Cu	rrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
STE 200	EIL G TON ROAD TER, FL 33759	US			
The above in the State		bmits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
		Signature of Registered Age	ent	Date	
Election Carr	npaign Financing 1	Frust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () D KIEFER, NEIL G 7296 BRYCE POI PINELLAS PARK,	INT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP ( ) Delete DIGIANNANTONIO, GILBERT 3717 WOODRIDGE PLACE : PALM HARBOR, FL 34684		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DST () Delete RANIERI, WILLIAM 949 SKYE LANE PALM HARBOR, FL 34683		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D DROSTE, EDWAF 20 MIDWAY ISLA CLEARWATER, F	RD C ND	Title: Name: Address: City-St-Zip:	() Change () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: NEIL G KIEFER PRES 04/16/2008

( ) Delete

JOHNSON, DENNIS D

DUNEDIN, FL 34698

277 ABERDEEN STREET

() Change () Addition