2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S68810

Title:

Name:

Address:

City-St-Zip:

Entity Name: THE WOOD-CHUCK WORKSHOP INC

FILED Jan 22, 2008 Secretary of State

,		on our volution or , iive			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
850 NE 3RD STREET				850 NE 3RD STREET	
#108 DANIA, FL 33004 US			#108 DANIA BEACH, FL 3:	3004 US	
Current Ma	ailing Address	s:	New Mailing Addres	New Mailing Address:	
3301 S. ANDREWS AVE FT.LAUDERDALE, FL 33315 US				3301 S. ANDREWS AVE FT.LAUDERDALE, FL 33316 US	
FEI Number:	65-0273674	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
501 GETTY	A, CHARLES ('SBURG TERF DERDALE, FL	२			
The above in the State		ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	!E:				
Electronic Signature of Registered Agent			ent	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () FICAROTTA, CH 501 GETTYSBU PLANTATION, FI	RG TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () FICAROTTA, ME 501 GETTYSBU PLANTATION, FI	RG TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () FICAROTTA, ME 501 GETTYSBU PLANTATION, FI	RG TERRACE	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: MERRY E FICAROTTA VP 01/22/2008

() Delete

501 GETTYSBURG TERRACE

FICAROTTA, MERRY

PLANTATION, FL 33325

() Change () Addition