

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 240388

FILED
Apr 10, 2005
Secretary of State

Entity Name: GORE'S DAIRY SUPPLY, INC.

Current Principal Place of Business:

7750 GALL BLVD
P. O. BOX 605
ZEPHYRHILLS, FL 33540 US

New Principal Place of Business:

Current Mailing Address:

7750 GALL BLVD
P. O. BOX 605
ZEPHYRHILLS, FL 33541 US

New Mailing Address:

FEI Number: 59-0953629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORE, F L
7750 GALL BLVD
ZEPHYRHILLS, FL 33541 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: PD () Delete
Name: GORE, F L,
Address: N. 2 MILES ON WIRE RD.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: SD () Delete
Name: GORE, FAYE,
Address: N 2.MILES ON WIRE RD
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VP () Delete
Name: HARWELL, DAVID
Address: 7750 GALL BLVD
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VP () Delete
Name: WAITS, JIM
Address: 7750 GALL BLVD.
City-St-Zip: ZEPHYRHILLS, FL 33541

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: F. L. GORE

PRES

04/10/2005

Electronic Signature of Signing Officer or Director

_____ Date