

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 276772

FILED
Jan 07, 2009
Secretary of State

Entity Name: TOM THUMB FOOD STORES, INC.

Current Principal Place of Business:

97 WEST OKEECHOBEE RD.
HIALEAH, FL 33010 US

New Principal Place of Business:

Current Mailing Address:

97 WEST OKEECHOBEE RD.
HIALEAH, FL 33010 US

New Mailing Address:

FEI Number: 59-1034928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCARTHY, JAMES A., JR.
97 W. OKEECHOBEE ROAD
HIALEAH, FL 33010 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: PTD () Delete
Name: MCCARTHY, JAMES A JR,
Address: 13004 SAN JOSE STREET
City-St-Zip: CORAL GABLES, FL 33156

Title: VSD () Delete
Name: MCCARTHY, SANDRA,
Address: 13004 SAN JOSE STREET
City-St-Zip: CORAL GABLES, FL

Title: D () Delete
Name: BENNION, THOMAS O.,
Address: 7273 CHESTERHILL CIR.
City-St-Zip: MOUNT DORA, FL 32757

Title: D () Delete
Name: MEZYK, CHARLENE,
Address: 13321 SW 16 CT.
City-St-Zip: DAVIE, FL

Title: D () Delete
Name: MCCARTHY, JAMES A III
Address: 18460 SW 83RD COURT
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: MCCARTHY, THOMAS P
Address: 439 N.E. 92ND ST
City-St-Zip: MIAMI SHORES, FL 33138

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:

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: JAMES A. MCCARTHY, JR.

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date