

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005293

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: CARLISLE FOODSERVICE PROPERTY, INC.

**Current Principal Place of Business:**

250 S. CLINTON STREET, SUITE 201  
SYRACUSE, NY 13202

**New Principal Place of Business:**

**Current Mailing Address:**

250 S. CLINTON STREET, SUITE 201  
SYRACUSE, NY 13202

**New Mailing Address:**

FEI Number: 20-1964589      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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 ( ) Delete  
Name: ROBERTS, DAVID A  
Address: 13925 BALLANTYNE CORPORATE PLACE, STE 400  
City-St-Zip: CHARLOTTE, NC 28277

Title: DS ( ) Delete  
Name: FORD, STEVEN J  
Address: 250 S. CLINTON STREET, SUITE 201  
City-St-Zip: SYRACUSE, NY 13202

Title: P ( ) Delete  
Name: SHANNON, DAVID M  
Address: 4711 E. HEFNER ROAD  
City-St-Zip: OKLAHOMA CITY, OK 73131

Title: T ( ) Delete  
Name: LOWE, CAROL P  
Address: 13925 BALLANTYNE CORPORATE PLACE STE. 400  
City-St-Zip: CHARLOTTE, NC 28277

**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: T (X) Change ( ) Addition  
Name: ZDIMAL, KEVIN  
Address: 13925 BALLANTYNE CORPORATE PLACE STE. 400  
City-St-Zip: CHARLOTTE, NC 28277

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: STEVEN J. FORD

DS

04/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date