

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L44197

FILED
Jan 06, 2011
Secretary of State

Entity Name: PACIFIC COLLIER FRESH COMPANY

Current Principal Place of Business:

925 NEW HARVEST RD
IMMOKALEE, FL 34142 US

New Principal Place of Business:

Current Mailing Address:

925 NEW HARVEST RD
IMMOKALEE, FL 34142 US

New Mailing Address:

FEI Number: 65-0191339 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LOUKONEN, EVERETT D
1320 N 15TH ST
IMMOKALEE, FL 34142 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

OFFICERS AND DIRECTORS:

Title: P/D
Name: SPROUL, KATHERINE
Address: 925 NEW HARVEST RD
City-St-Zip: IMMOKALEE, FL 34142

Title: T/D
Name: ABELL, MICHAEL
Address: 925 NEW HARVEST RD
City-St-Zip: IMMOKALEE, FL 34142

Title: D
Name: COLLIER, BARRON III
Address: 2600 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

Title: D
Name: BOAZ, BRADLEY A
Address: 2600 GOLDEN GATE PARKWAY
City-St-Zip: NAPLES, FL 34105

Title: C/D
Name: ESFORMES, JOSEPH
Address: 925 NEW HARVEST ROAD
City-St-Zip: IMMOKALEE, FL 34142

Title: S/D
Name: HELLER, BILLY
Address: 925 NEW HARVEST ROAD
City-St-Zip: IMMOKALEE, FL 34142

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL ABELL

_____ Electronic Signature of Signing Officer or Director

T/D

01/06/2011

_____ Date