## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000056831

Entity Name: PANS FOODS, INC.

FILED Feb 09, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

367 N TEMPLE AVE 367 N TEMPLE AVE STARFE, FL 32091 STARKE, FL 32091

**Current Mailing Address: New Mailing Address:** 

10850 SW 105TH ST 1404 PRATT ST OCALA, FL 34481 STARKE, FL 32091

FEI Number: 11-3688644 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STEPHENS, NORMA SNIDER, PAMELA J 1404 PRATT ST 10850 SW 105TH ST OCALA, FL 34481 STARKE, FL 32091 US

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: PAMELA SNIDER 02/09/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition STEPHENS, NORMA SNIDER, PAMELA J Name: Name:

10850 SW 105TH ST 1404 PRATT ST Address: Address: City-St-Zip: OCALA, FL 34481 City-St-Zip: STARKE, FL 32091

Title: Title: () Delete (X) Change ( ) Addition

Name: SNIDER, ALAN Name: SNIDER, ALAN C/O 10850 SW 105TH ST 1404 PRATT ST Address: Address: OCALA, FL 34481 STARKE, FL 32091 City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

SNIDER, PAMELA Name: C/O 10850 SW 105TH ST Address: City-St-Zip: OCALA, FL 34481 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA SNIDER 02/09/2006 D