

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000088500

FILED
Apr 12, 2007
Secretary of State

Entity Name: THE BUTCHER BLOCK, INC.

Current Principal Place of Business:

19614 BERGENFELD DRIVE
LAND O' LAKES, FL 34638

New Principal Place of Business:

16319 N. FLORIDA AVENUE
LUTZ, FL 33549

Current Mailing Address:

19614 BERGENFELD DRIVE
LAND O' LAKES, FL 34638

New Mailing Address:

FEI Number: 20-5194665 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, J. DARRYL
19614 BERGENFELD DRIVE
LAND O' LAKES, FL 34638 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: SMITH, J. DARRYL
Address: 19614 BERGENFELD DRIVE
City-St-Zip: LAND O LAKES, FL 34638

Title: V () Change (X) Addition
Name: WILLIAMS, JOHN
Address: 101 E. KENNEDY BLVD., SUITE 2700
City-St-Zip: TAMPA, FL 33602

Title: V () Change (X) Addition
Name: KNOWLES, CHUCK G
Address: 3824 BELLEWATER BLVD.
City-St-Zip: RIVERVIEW, FL 33569

Title: S () Change (X) Addition
Name: KNOWLES, LINDA G
Address: 3824 BELLEWATER BLVD.
City-St-Zip: RIVERVIEW, FL 33569

Title: T () Change (X) Addition
Name: SMITH, M. KATHY
Address: 19614 BERGENFELD DRIVE
City-St-Zip: LAND O LAKES, FL 34638

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: M. KATHY SMITH

T

04/12/2007

Electronic Signature of Signing Officer or Director

_____ Date