

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000080644

FILED
Feb 18, 2010
Secretary of State

Entity Name: HESPERIDES, INC.

Current Principal Place of Business:

450 N. WYMORE RD.
WINTER PARK, FL 32789

New Principal Place of Business:

8866 OLD WINTER GARDEN RD.
ORLANDO, FL 32835

Current Mailing Address:

450 N. WYMORE RD.
WINTER PARK, FL 32789

New Mailing Address:

P.O. BOX 634
GOTHA, FL 34734

FEI Number: 52-1218886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

W&P SERVICES, INC.
450 N. WYMORE RD.
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

MENDES, ELZA
8866 OLD WINTER GARDEN RD
ORLANDO, FL 32835 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: ELZA MENDES

02/18/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D, S
Name: MENDES, ELZA
Address: P. O. BOX 634
City-St-Zip: GOTHA, FL 34734

Title: P
Name: FELLOUS, ELIZABETH
Address: P.O. BOX 634
City-St-Zip: GOTHA, FL 34734

Title: VP,T
Name: FELLOUS, HECTOR
Address: P.O. BOX 634
City-St-Zip: GOTHA, FL 34734

Title: EVP
Name: MENDES, ELZA
Address: P. O. BOX 634
City-St-Zip: GOTHA, FL 34734

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: ELZA MENDES

EVP

02/18/2010

Electronic Signature of Signing Officer or Director

Date