

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000098087

FILED  
Jan 18, 2009  
Secretary of State

Entity Name: FRESH VENDING, INC.

**Current Principal Place of Business:**

18176 WINDING OAKS BLVD  
HUDSON, FL 34667 US

**New Principal Place of Business:**

**Current Mailing Address:**

18176 WINDING OAKS BLVD  
HUDSON, FL 34667 US

**New Mailing Address:**

FEI Number: 26-3650999      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 US

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

ELEANOR, BROWN PRES  
18176 WINDING OAKS BLVD.  
HUDSON, FL 34667 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: ELEANOR BROWN

01/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: BROWN, ELEANOR  
Address: 18176 WINDING OAKS BLVD  
City-St-Zip: HUDSON, FL 34667 US

Title: SECR ( ) Delete  
Name: BROWN, ELEANOR  
Address: 18176 WINDING OAKS BLVD  
City-St-Zip: HUDSON, FL 34667 US

Title: TREA ( ) Delete  
Name: BROWN, ELEANOR  
Address: 18176 WINDING OAKS BLVD  
City-St-Zip: HUDSON, FL 34667 US

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

**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: VP ( ) Change (X) Addition  
Name: BROWN, CHRIS  
Address: 18176 WINDING OAKS BLVD  
City-St-Zip: HUDSON, FL 34667 US

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: CHRIS BROWN

VP

01/18/2009

Electronic Signature of Signing Officer or Director

Date