

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000005034

Entity Name: GOLDFISH USA, INC.

Current Principal Place of Business:

5550 FORT DENAUD RD
FT DENAUD, FL 33935

FILED
Sep 17, 2014
Secretary of State
CC2111943085

Current Mailing Address:

BOX 2020
LABELLE, FL 33975

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PORTER, LUANNE
5550 FORT DENAUD RD
FT DENAUD, FL 33935 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name BATEMAN, BAY
Address 245 MIDDAUGH RD
City-State-Zip: CLARENDON HILLS IL 60514

Title D
Name PORTER, LUANNE
Address BOX 2020
City-State-Zip: LABELLE FL 33975

Title D
Name KNILL, VICKI
Address 3363 SANFORD DR
City-State-Zip: MARIETTA GA 30066

Title D
Name WILSON, ELIZABETH
Address 195 OLD PERRY RD
City-State-Zip: BONAIRE GA 31005

Title D
Name PORTER, WILLIAM
Address BOX 2020
City-State-Zip: LABELLE FL 33975

Title D
Name MCGURK, MAUREEN
Address 7017 CLINE DR
City-State-Zip: GLYNN LA 70736

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUANNE PORTER

DIRECTOR

09/17/2014

Electronic Signature of Signing Officer/Director Detail

Date