

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # 129214

1. Entity Name

TAMPA WHOLESALE PRODUCE MARKET, INC.



Principal Place of Business

2801 E HILLSBORO AVE
TAMPA, FL 33610

Mailing Address

2801 E HILLSBORO AVE
TAMPA, FL 33610



03052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0475990

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRIZZAFFE, CHARLIE V.
2801 EAST HILLSBOROUGH AVENUE
TAMPA, FL 33610

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000861136
04/02/08-80089-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	MARTIN, TOM
STREET ADDRESS	2801 E HILLSBORO
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	VP
NAME	KILLEBREW, KEN
STREET ADDRESS	2801 E HILLSBORO
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	PD
NAME	GRIZZAFFE, CHARLIE V
STREET ADDRESS	2801 E HILLSBORO
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	ATD
NAME	WEYAND, LR III
STREET ADDRESS	2801 E HILLSBORO
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	D
NAME	WHEELER, MIKE
STREET ADDRESS	2801 E HILLSBORO
CITY-ST-ZIP	TAMPA, FL 33610
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth Killebrew*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KENNETH KILLEBREW 3-10-08