## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 165930**

Entity Name: DAIRY-MIX, INC.

FILED Jan 03, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3020 46TH ST PETER	HAVEN RSBURG, FL 3	33714	US			
Current Mailing Address:				New Mailing Address:		
3020 46TH ST PETER	HAVEN RSBURG, FL3	33714	US			
FEI Number: 59-0659640 FEI Number Applied For ( )				FEI Number Not Applicable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent l	Registered Agent:	Name and	Address of	New Registered Agent:
14098 WH CLEARWA	EDWARD J. IISPERWOOD ATER, FL 3462 named entity s	22 US		urpose of changing i	ts registered	office or registered agent, or both,
in the State	e of Florida.		·		_	
SIGNATU						
	Electror	iic Signa	ture of Registered Age	nt		Date
Election Car	mpaign Financing	g Trust Fu	ınd Contribution ( ).			
OFFICER	S AND DIREC	TORS:		ADDITION	IS/CHANGE	S TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	CD ( ) CORYN,ANTHO 399 RED CEDA ST PETERSBU	R CT, NE		Title: Name: Address: City-St-Zip:	CORYN,EDW	PERWOOD DR
Title: Name: Address: City-St-Zip:	PD () CORYN,EDWA 14098 WHISPE CLEARWATER	R WOOD	DR	Title: Name: Address: City-St-Zip:	CORYN,JOH 1270 79TH S	
Title: Name: Address: City-St-Zip:	VD (X) CORYN, JOHN 1270 S 79 ST ST PETERSBU		3707	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	TD () CORYN, THOM 103-HICKORY BRANDON, FL		R.	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition
Title: Name: Address:	SD () CORYN, ANN N 808 WATER HY		CT.NE.	Title: Name: Address:	(	( ) Change( ) Addition

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.

City-St-Zip:

SIGNATURE: JOHN S. CORYN VD 01/03/2008

City-St-Zip: ST PETERSBURG, FL 33703