

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 182437

FILED
Apr 29, 2009
Secretary of State

Entity Name: GUSTAFSON'S FAMILY ENTERPRISES, INC.

Current Principal Place of Business:

50 NORTH LAURA STREET STE 2750
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 40086
JACKSONVILLE, FL 322030086 US

New Mailing Address:

PO BOX 600337
JACKSONVILLE, FL 322600337 US

FEI Number: 59-0729985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT, ABRAHAM, REITER & MCCORMICK, PA
50 NORTH LAURA STREET STE 2750
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPVP () Delete
Name: GUSTAFSON, E. S. JR
Address: P.O. BOX 40086
City-St-Zip: JACKSONVILLE, FL 32203

Title: AS () Delete
Name: WAGNER, GAIL G
Address: P.O. BOX 40086
City-St-Zip: JACKSONVILLE, FL 32203

Title: AVP () Delete
Name: GUSTAFSON, EDDIE
Address: P.O. BOX 40086
City-St-Zip: JACKSONVILLE, FL 32203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVP (X) Change () Addition
Name: GUSTAFSON, E. S. JR
Address: P.O. BOX 600337
City-St-Zip: JACKSONVILLE, FL 322600337

Title: AS (X) Change () Addition
Name: WAGNER, GAIL G
Address: P.O. BOX 600337
City-St-Zip: JACKSONVILLE, FL 322600337

Title: DAVP (X) Change () Addition
Name: GUSTAFSON, EDDIE
Address: P.O. BOX 600337
City-St-Zip: JACKSONVILLE, FL 322600337

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: E S GUSTAFSON JR

DPVP

04/29/2009

Electronic Signature of Signing Officer or Director

Date