

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 198433

FILED  
Jan 20, 2010  
Secretary of State

Entity Name: SORRELLS BROS. PACKING CO., INC.

**Current Principal Place of Business:**

1192 NE LIVINGTON ST  
ARCADIA, FL 34266

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 551  
ARCADIA, FL 34265

**New Mailing Address:**

FEI Number: 59-0812179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SORIA, G. CRAIG  
2201 RINGLING BLVD,  
SUITE 103  
SARASOTA, FL 34237 US

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

SORIA, G. CRAIG  
2201 RINGLING BLVD.  
SUITE 103  
SARASOTA, FL 34237 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:

01/20/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SORIA, LEDANE  
Address: 1716 BAYSHORE ROAD  
City-St-Zip: NOKOMIS, FL 34275

Title: V  
Name: SORIA, G. CRAIG  
Address: 1716 BAYSHORE ROAD  
City-St-Zip: NOKOMIS, FL 34275

Title: ST  
Name: SORRELLS, STEVE  
Address: 6923 NW STATE 661  
City-St-Zip: ARCADIA, FL 34266

Title: D  
Name: SORRELLS, BETSY  
Address: 6923 NW STATE 661  
City-St-Zip: ARCADIA, FL 34266

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

SIGNATURE: STEVE SORRELLS

ST

01/20/2010

Electronic Signature of Signing Officer or Director

Date