

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 232011

FILED
Feb 18, 2009
Secretary of State

Entity Name: COUNTY DISTRIBUTORS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

120 S. FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

4108 NW 1ST PLACE
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 59-0914722

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUSMICH, CHRIS MR.
4108 NW 1ST PLACE
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

KUSMICH, CHRISTOS R PRES.
4108 NW 1ST PLACE
DEERFIELD BEACH, FL 33442 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: CHRIS KUSMICH

02/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: KUSMICH, CHRIS,
Address: 4108 NW 1ST PLACE
City-St-Zip: DEERFIELD BCH, FL

Title: VPD () Delete
Name: KUSMICH, KATHY
Address: 4108 NW 1ST PL.
City-St-Zip: DEERFIELD BCH., FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHRIS KUSMICH

PRES

02/18/2009

Electronic Signature of Signing Officer or Director

Date