2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 240388

Entity Name: GORE'S DAIRY SUPPLY, INC.

FILED Feb 25, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7750 GALL BLVD 16100 HWY 301 N

P. O. BOX 605 DADE CITY, FL 33523 US

ZEPHYRHILLS, FL 33540 US

Current Mailing Address: New Mailing Address:

7750 GALL BLVD P O BOX 605 P. O. BOX 605 P. O. BOX 605

ZEPHYRHILLS, FL 33541 US ZEPHYRHILLS, FL 33539 US

FEI Number: 59-0953629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GORE, FRED L PRES

7750 GALL BLVD 16100

ZEPHYRHILLS, FL 33541 US HWY 301 N DADE CITY, FL 33523 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: F L GORE 02/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 GORE, F L,
 Name:
 GORE, FRED L PD

 Address:
 N. 2 MILES ON WIRE RD.
 Address:
 34627 SMART DR.

 City-St-Zip:
 ZEPHRYHILLS, FL 33541
 City-St-Zip:
 ZEPHRYHILLS, FL 33541

Title: SD () Delete Title: S (X) Change () Addition

 Name:
 GORE,FAYE,
 Name:
 GORE, FRED L S

 Address:
 N 2.MILES ON WIRE RD
 Address:
 34627 SMART DR

 City-St-Zip:
 ZEPHRYHILLS, FL 33541
 City-St-Zip:
 ZEPHYRHILLS, FL 33541

Title: VP (X) Delete Title: () Change () Addition

 Name:
 HARWELL, DAVID
 Name:

 Address:
 7750 GALL BLVD
 Address:

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition

 Name:
 WAITS, JIM
 Name:

 Address:
 7750 GALL BLVD.
 Address:

 City-St-Zip:
 ZEPHYRHILLS, FL 33541
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: F L GORE P 02/25/2007