

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 240388

FILED
Feb 15, 2008
Secretary of State

Entity Name: GORE'S DAIRY SUPPLY, INC.

Current Principal Place of Business:

16100 HWY 301 N.
DADE CITY, FL 33523 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 605
P. O. BOX 605
ZEPHYRHILLS, FL 33539 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

GORE, FRED L PRES
16100
HWY 301 N
DADE CITY, FL 33523 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: PD () Delete
Name: GORE, FRED L PD
Address: 34627 SMART DR.
City-St-Zip: ZEPHRYHILLS, FL 33541

Title: S () Delete
Name: GORE, FRED L S
Address: 34627 SMART DR
City-St-Zip: ZEPHYRHILLS, FL 33541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GORE, FRED L PD
Address: 36404 FAIRVIEW HTS RD.
City-St-Zip: ZEPHRYHILLS, FL 33541

Title: S (X) Change () Addition
Name: GORE, FRED L S
Address: 36404 FAIRVIEW HTS RD
City-St-Zip: ZEPHYRHILLS, FL 33541

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: FRED L GORE

PRES

02/15/2008

Electronic Signature of Signing Officer or Director

Date