2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# 267936

Entity Name: TRUE FRESH EGGS, INC.

Current Principal Place of Business:

4622 GALL BLVD
P. O. BOX 9005
ZEPHYRHILLS, FL 335396005

New Principal Place of Business:

4622 GALL BLVD
ZEPHYRHILLS, FL 335396005

Current Mailing Address:

4622 GALL BLVD
P. O. BOX 9005
ZEPHYRHILLS, FL 335396005

New Mailing Address:

4622 GALL BLVD
ZEPHYRHILLS, FL 335396005

FEI Number: 59-1039202 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LINVILLE, DANNY
4622 GALL BLVD
ZEPHYRHILLS, FL 33541 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: D ( ) Delete
Name: LINVILLE, TONY
Address: 4622 GALL BLVD.
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D ( ) Delete
Name: LINVILLE, TIM
Address: 4622 GALL BLVD.
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: DS ( ) Delete
Name: LINVILLE, TERRY
Address: 5215 BERNADETTE DRIVE
City-St-Zip: ZEPHYRHILLS, FL

Title: PD ( ) Delete
Name: LINVILLE, DANNY
Address: 4622 GALE BLVD.
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D ( ) Delete
Name: LINVILLE, JAY
Address: 4622 GALL BLVD
City-St-Zip: ZEPHYRHILLS, FL 33542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: TERRY LINVILLE SEC 04/22/2009

Electronic Signature of Signing Officer or Director — Date