

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 294801

FILED
Apr 21, 2009
Secretary of State

Entity Name: EAST COAST PACKERS, INC.

Current Principal Place of Business:

2130 N. OLD DIXIE HIGHWAY
P. O. BOX 1059
FT. PIERCE, FL 349461407

New Principal Place of Business:

2130 N. OLD DIXIE HIGHWAY
FT. PIERCE, FL 34946

Current Mailing Address:

2130 N. OLD DIXIE HIGHWAY
P. O. BOX 1059
FT. PIERCE, FL 349461407

New Mailing Address:

1900 OLD DIXIE HIGHWAY
FT. PIERCE, FL 34946

FEI Number: 59-1101197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARNELL, RICHARD M JR
1900 DIXIE HWY.
FORT PIERCE, FL 34946 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: DV () Delete
Name: VARN, DONALD M
Address: 2130 OLD DIXIE HIGHWAY
City-St-Zip: FORT PIERCE, FL 34946

Title: DP () Delete
Name: NELSON, GREGORY P
Address: 1900 OLD DIXIE HWY
City-St-Zip: FORT PIERCE, FL 34946

Title: DS () Delete
Name: GILET, JEAN J
Address: 1900 OLD DIXIE HWY.
City-St-Zip: FORT PIERCE, FL 34946

Title: DTAS () Delete
Name: EGAN, ROBERT W
Address: 1900 OLD DIXIE HWY
City-St-Zip: FORT PIERCE, FL 34946

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:

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: GREGORY P NELSON

DP

04/21/2009

Electronic Signature of Signing Officer or Director

Date