

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 296666

FILED  
Jan 03, 2011  
Secretary of State

Entity Name: WILKINSON-COOPER PRODUCE INC

**Current Principal Place of Business:**

701 N.W. 12TH ST.  
P. O. BOX 880  
BELLE GLADE, FL 33430

**New Principal Place of Business:**

**Current Mailing Address:**

701 N.W. 12TH ST.  
P. O. BOX 880  
BELLE GLADE, FL 33430

**New Mailing Address:**

FEI Number: 59-1103654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WILKINSON, CHARLES D, JR  
701 N.W. 12TH STREET  
BELLE GLADE, FL 33430 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CHARLES, WILKINSON D JR  
Address: 701 NW 12TH ST  
City-St-Zip: BELLE GLADE, FL 33430

Title: D  
Name: WILKINSON, FRANCES F  
Address: 601 N MCDONNALD ST APT #508  
City-St-Zip: MT DORA, FL 32757

Title: D  
Name: WILKINSON, ELIZABETH  
Address: ROUTE 9, BOX 506  
City-St-Zip: LAKE CITY, FL

Title: ST  
Name: WILKINSON, GIBSON C SR  
Address: 15173 80TH DRIVE N  
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby 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 all other like empowered.

SIGNATURE: CHARLES D WILKINSON JR

P

01/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date