2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 297177

Entity Name: NEBCO, INC. OF LAKELAND.

FILED Apr 14, 2009 Secretary of State

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

215 MCDONALD STREET 215 MCDONALD STREET POST OFFICE BOX 2297 LAKELAND, FL 33803 LAKELAND, FL 338069297

New Mailing Address: Current Mailing Address:

215 MCDONALD STREET P. O. BOX 2297 POST OFFICE BOX 2297 LAKELAND, FL 33806 LAKELAND, FL 338069297

FEI Number: 59-1155239 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:

BURT, GEORGE R BURT, GEORGE R 215 MCDONALD STREET 215 MCDONALD STREET LAKELAND, FL 33803 LAKELAND, FL 33806

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: GEORGE R. BURT 04/14/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

BURT, JEAN O

215 MCDONALD ST

LAKELAND, FL 33806

VDS

Title:

Name:

Address:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VDS (X) Change () Addition Name: BURT, JEAN O

215 MCDONALD ST Address: LAKELAND, FL 33803 City-St-Zip:

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

BURT, GEORGE R Name: BURT, GEORGE R 215 MCDONALD ST 215 MCDONALD ST Address: LAKELAND, FL 33806 LAKELAND, FL 33803 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: VD VD.

CONE, BEVERLY CONE, BEVERLY Name: Name: 215 MCDONALD ST 215 MCDONALD ST Address: Address: City-St-Zip: LAKELAND, FL 33806 City-St-Zip: LAKELAND, FL 33803

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

JANUTOLO, RÚSSELL JANUTOLO, RUSSELL Name: Name: Address: 215 MCDONALD ST Address: 215 MCDONALD ST City-St-Zip: LAKELAND, FL 33806 City-St-Zip: LAKELAND, FL 33803

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: GEORGE R. BURT PD 04/14/2009