2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 08:00 AM
Secretary of State

DOCUMENT # 346402

1. Entity Name
GOLDEN CRUST BAKERY, INC.

Principal Place of Business	Mailing Address
10994 70TH AVENUE N. SEMINOLE, FL 33772	8580 139TH LANE N. SEMINOLE, FL 33776

01192008 CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1261181

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JUDD, JAMES S.
8580 139TH LANE
SEMINOLE, FL 33776

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000858138
04/01/08-80034-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	JUDD, JAMES S
STREET ADDRESS	8580 139TH LANE
CITY-ST-ZIP	SEMINOLE, FL
TITLE	ST
NAME	JUDD, DOROTHY B.
STREET ADDRESS	8580 139TH LANE
CITY-ST-ZIP	SEMINOLE, FL
TITLE	D
NAME	MCFARLAND, DONALD O
STREET ADDRESS	311 SO MISSOURI AVE
CITY-ST-ZIP	CLEARWATER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James S Judd James S Judd 3-10-08 (727) 397-5913