

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 364779

FILED
May 04, 2009
Secretary of State

Entity Name: GOODING'S SUPERMARKETS, INC.

Current Principal Place of Business:

8255 INTERNATIONAL DRIVE
STE 120
ORLANDO, FL 32819 US

New Principal Place of Business:

12521 SR 535
LAKE BUENA VISTA, FL 32836 US

Current Mailing Address:

P O BOX 691329
ORLANDO, FL 328691329 US

New Mailing Address:

FEI Number: 59-1292169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOERK, RUSSELL
8255 INTERNATIONAL DRIVE
STE 120
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

DOERK, RUSSELL
12521 SR 535
LAKE BUENA VISTA, FL 32836 US

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:

05/04/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: DOERK, RUSSELL
Address: 8255 INTERNATIONAL DRIVE STE 120
City-St-Zip: ORLANDO, FL 32819

Title: D/C () Delete
Name: GOODING, JONATHAN
Address: 8255 INTERNATIONAL DRIVE STE 120
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: GOODING, MARY LOU
Address: 8255 INTERNATIONAL DRIVE STE 120
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: DOERK, RUSSELL
Address: 12521 SR 535
City-St-Zip: LAKE BUENA VISTA, FL 32836

Title: D/C (X) Change () Addition
Name: GOODING, JONATHAN
Address: 12521 SR 535
City-St-Zip: LAKE BUENA VISTA, FL 32836

Title: D (X) Change () Addition
Name: GOODING, MARY LOU
Address: 12521 SR 535
City-St-Zip: LAKE BUENA VISTA, FL 32836

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: RUSSELL DOERK

D/P

05/04/2009

Electronic Signature of Signing Officer or Director

Date