

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 493947

FILED  
Feb 02, 2012  
Secretary of State

**Entity Name:** PRESTO FOOD STORES, INC.

**Current Principal Place of Business:**

2204 PARKVIEW DR.  
PLANT CITY, FL 33563

**New Principal Place of Business:**

**Current Mailing Address:**

2204 PARKVIEW DR  
PLANT CITY, FL 33563

**New Mailing Address:**

**FEI Number:** 59-1641137

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, CAROLYN R  
2204 PARKVIEW DR.  
PLANT CITY, FL 33563 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: OWNE  
Name: HUGH C. ROBINSON, III/TRUST  
Address: 2869 HAMMOCK DR  
City-St-Zip: PLANT CITY, FL 33563

Title: VST  
Name: SMITH, CAROLYN R  
Address: 8416 SOUTHWOOD PINES  
City-St-Zip: LITHIA, FL 33547

Title: AST  
Name: SHULTZ, JENNIFER N  
Address: 3808 ANCIENT OAKS TR  
City-St-Zip: PLANT CITY, FL 33565

Title: T/PR  
Name: ROBINSON, EMILY T  
Address: 2869 HAMMOCK DR  
City-St-Zip: PLANT CITY, FL 33563

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: CAROLYN R SMITH

VST

02/02/2012

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

\_\_\_\_\_  
Date