

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 510626

FILED
Apr 27, 2005
Secretary of State

Entity Name: DEW FRESH PRODUCE CO., INC.

Current Principal Place of Business:

122 PATRICK DRIVE
FORT WALTON BEACH, FL 325476723

New Principal Place of Business:

Current Mailing Address:

2671 COUNTY HWY. 83A WEST
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 59-1688924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRINCE, KAREN
2671 COUNTY HWY. 83A WEST
FREEPORT, FL 32439 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PRINCE, KAREN
Address: 122 PATRICK DR
City-St-Zip: FT. WALTON BCH., FL

Title: ST () Delete
Name: PRINCE, JESSICA
Address: 2671 COUNTY HWY. 83A WEST
City-St-Zip: FREEPORT, FL 32439 US

Title: VP () Delete
Name: PRINCE, LISA K
Address: 2671 COUNTY HWY. 83A WEST
City-St-Zip: FREEPORT, FL 32439 US

Title: VP () Delete
Name: PRINCE, APRIL L
Address: 2671 COUNTY HWY. 83A WEST
City-St-Zip: FREEPORT, FL 32439 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KAREN PRINCE

PRES

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date