## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 530026** 

Entity Name: TROPICAL NUT AND FRUIT, INC.

**FILED** Feb 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3368 BARTLETT ROAD 3368 BARTLETT BLVD ORLANDO, FL 32811 ORLANDO, FL 32811

**Current Mailing Address: New Mailing Address:** 

PO BOX 617138 ORLANDO, FL 32861

FEI Number: 59-1738630 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:

CHAPMAN, VICTOR L 18 WALL STREET ORLANDO, FL 32801 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition WILLIAMSON, MICHAEL WILLIAMSON, MICHAEL Name: Name:

7143 BRANIGAN GATE 53 DOMINION DRIVE Address: Address: City-St-Zip: MISSISSAUGA, ON L5N7L6 City-St-Zip: GUELPH, ONTARIO, CANADA, ON N1L0B4

Title: Title: () Delete () Change () Addition Name: YORK, GERALD P., Name:

1100 CONTINENTIAL BLVD Address: Address: CHARLOTTE, NC 28273 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: VPD ( ) Delete VPD WILLIAMSON, GARLAND WILLIAMSON, GARLAND Name: Name:

71 ADMIRAL BLVD BOX 309 Address: Address:

City-St-Zip: MISSISSAUGA, ONTARIO, L5Y 2T1 City-St-Zip: ERIN, ONTARIO, CANADA, CA NOB1TO

Title: ( ) Delete Title: (X) Change ( ) Addition USSERY, MICHAEL J USSERY, MICHAEL J Name: Name: Address: 4008 MAGUIRE BLVD #5216 Address: 6112 RALEIGH STR, APT 1509

City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32835

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.

VΡ SIGNATURE: MICHAEL WILLIAMSON 02/23/2009