

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 542290

FILED
Mar 23, 2009
Secretary of State

Entity Name: ORRIN H. COPE PRODUCE, INC.

Current Principal Place of Business:

27232 S FEDERAL HWY
NARANJA, FL 33032

New Principal Place of Business:

75 W PALM DR
FLORIDA CITY, FL 33034

Current Mailing Address:

P.O. BOX 700189
GOULDS, FL 33170

New Mailing Address:

P.O. BOX 349167
FLORIDA CITY, FL 33034

FEI Number: 59-1760180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COPE, ORRIN H.
27750 S.W. 157 AVE.
HOMESTEAD, FL 33031 US

Name and Address of New Registered Agent:

COPE, ORRIN H.
17651 NW 256 ST
HIGH SPRINGS, FL 32643 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: _____

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COPE, ORRIN H,
Address: 27750 S W 157 AVE
City-St-Zip: HOMESTEAD, FL

Title: V () Delete
Name: EDNEY, LEWIS P
Address: 10413 N W 245TH TERRACE
City-St-Zip: ALACHUA, FL 32615

Title: ST () Delete
Name: COPE, L. D
Address: 27750 SW 157 AVE
City-St-Zip: HOMESTEAD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COPE, ORRIN H,
Address: 17651 NW 256 ST
City-St-Zip: HIGH SPRINGS, FL 32643

Title: V (X) Change () Addition
Name: EDNEY, LEWIS P
Address: 193 BELFLOWER RD
City-St-Zip: TIFTON, GA 31794

Title: ST (X) Change () Addition
Name: COPE, L. D
Address: 17651 NW 256 ST
City-St-Zip: HIGH SPRINGS, FL 32643

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: ORRIN COPE

PD

03/23/2009

Electronic Signature of Signing Officer or Director

Date