

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 568825

FILED
Jan 07, 2009
Secretary of State

Entity Name: GERMAN AMERICAN TRADING COMPANY, INCORPORATED.

Current Principal Place of Business:

GERMAN AMERICAN TRADING CO, INC
STE 37
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17789
TAMPA, FL 33682

New Mailing Address:

FEI Number: 59-2331515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOBE, DAVID C., ESQ.
501 E. KENNEDY BLVD. 17TH FLOOR
TAMPA, FL 33602 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: PVS () Delete
Name: NEIDHARDT, BERTHOLD,
Address: P.O. BOX 17789 N/A
City-St-Zip: TAMPA, FL 336827789

Title: TD () Delete
Name: NEIDHARDT, BERTHOLD,
Address: P.O. BOX 17789 N/A
City-St-Zip: TAMPA, FL 336827789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BERTHOLD NEIDHARDT

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date