2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 588792

FILED Jan 08, 2009 Secretary of State

Entity Name: INSTITUTIONAL FOOD BROKERS OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

12402 N 56TH STREET TAMPA, FL 33617

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 291637 TAMPA, FL 33687

FEI Number: 59-1854893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RAKOCY, F. J. RAKOCY, F. J P 31438 SADDLE LN 31438 SADDLE LN

ZEPHYRHILLS, FL 33543 ZEPHYRHILLS, FL 33543 US 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: F. J. RAKOCY 01/08/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name: Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

RAKOCY, WANDA, RAKOCY, WANDA E D Name: Name: 31438 SADDLE LN. 31438 SADDLE LN. Address: Address: ZEPHYRHILLS, FL City-St-Zip: City-St-Zip: ZEPHYRHILLS, FL 33543

Title: PD Title: PD () Delete (X) Change () Addition

Name: RAKOCY, F.J. Name: RAKOCY, F.J. 31438 SADDLE LN 31438 SADDLE LN Address: Address: ZEPHYRHILLS, FL ZEPHYRHILLS, FL 33543 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete VS

PRYBYS, GEORGE, PRYBYS, GEORGE J VS Name: Name: 6004 PRATT STREET 6004 PRATT STREET Address: Address: City-St-Zip: TAMPA, FL City-St-Zip: TAMPA, FL 33647

Title: () Delete Title: (X) Change () Addition

WOJTKEIWICZ, BILL WOJTKEIWICZ, BILL J D Name: 8759 PINE BARRON DRIVE Address: 8759 PINE BARRON DRIVE City-St-Zip: City-St-Zip: ORLANDO, FL ORLANDO, FL 32817

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: WANDA E. RAKOCY D 01/08/2009