2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

619761 **DOCUMENT #**

1. Entity Name

FAMILY FOODS, INC.



FILED Feb 07, 2003 8:00 am Secretary of State

02-07-2003 90054 038 ***150.00

Principal Place of Business 3721 DOWNWIND LN FORT MYERS FL 33917 US			3721	Mailing Address 3721 DOWNWIND LN FORT MYERS FL 33917 US								
2. Principal f	Place of Busin	iess	3. Mai	ling Address				E 504310 86101 15010 10110 10010 1			11061 4 1011 1 90 6	
Suite, Apt	#, etc.		Suit	Suite, Apt. #, etc.			-	CHECK HERE IF MAKING CHANGES				
City & State			City	& State			4. F	1 397 199/0309			pplied For ot Applicable	
Zip		Country	, Zip,	هواره نجي د جي پندندر د دند	Country	مسيد و المسيد	5. Ĉ	ertificate of Status Desired		\$8.75-Ad Fee Require	ditional -	
	6. Name	and Address of Cu	ırrent Registere	ed Agent			7. N	ame and Address of New I	Registered A	gent		
DOTAIN	F T	V.			N	ame	•					
BRITIAIN,		A PE			St	reet Address	s (P.O. Bo	x Number is Not Acceptable	e)			
	WNWIND LA											
NOFIM	YERS FL 33	91/										
· ·					Ci	•			FL	Zip Cod	i	
8. The above the obligation	e named entity itions of regist	y submits this statem ered agent.	nent for the purp	ose of changing its	registered of	ffice or regist	tered age	ent, or both, in the State of Fl	orida. I am f	amiliar with,	and accept	
SIGNATURE							· <u></u>					
<u> </u>	Şignature, typed	or printed name of registered	d agent and title if app	licable. (NOTE	: Registered Ager	nt signature requi	red when rein	nstating)	DATE	*		
Afte	r May 1, 200	! FEE IS \$150.00 3 Fee will be \$55	0.00	e bott of the P		and the second		9. Election Campaign Fil Trust Fund Contribution			00 May Be	
*Make Checl	k Payable to	Florida Departme	ent of State					Rust Fulla Contributio	,,,,	, nout	0.01.000	
*Make Checl			ent of State AND DIRECTO	RS	11.		ADD	DITIONS/CHANGES TO OFF		, ,,,,,,		
10. TITLE	IP .	OFFICERS		RS Delete	11.		ADE			, ,,,,,,		
10. TITLE NAME	P BRITTAIN,	OFFICERS			TITLE NAME		ADE			DIRECTOR	S IN 11	
10. TITLE	P BRITTAIN, 3721 DOW	OFFICERS			TITLE		ADE			DIRECTOR	S IN 11	
10. TITLE NAME STREET ADDRESS	P BRITTAIN, 3721 DOW NO FT MY	OFFICERS F.T. NWIND LANE ERS FL 33917			TITLE NAME STREET ADD		ADC			DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN,	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M.		☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME	IP I	ADD			DIRECTOR Change	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI	DRESS	ADC			DIRECTOR Change	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M.	AND DIRECTO	☐ Delete ☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI CITY-ST-ZI	DRESS	ADD			DIRECTOR Change	S IN 11 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI CITY-ST-ZI TITLE	DRESS	ADD			DIRECTOR Change	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI CITY-ST-ZI	DRESS P	ADD			DIRECTOR Change	S IN 11 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME	DRESS DRESS	ADD			DIRECTOR Change	S IN 11 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI STREET ADI	DRESS DRESS	ADD		FICERS AND	DIRECTOR Change	S IN 11 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADIC CITY-ST-ZI TITLE NAME	DRESS P DRESS	ADD		FICERS AND	DIRECTOR Change Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADIC CITY-ST-ZI TITLE NAME STREET ADIC TITLE NAME STREET ADIC CITY-ST-ZI TITLE NAME STREET ADIC TITLE NAME STREET ADIC STREET ADIC	DRESS DRESS P DRESS	ADD		FICERS AND	DIRECTOR Change Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI TITLE NAME	DRESS DRESS P DRESS	ADD		ICERS AND	DIRECTOR Change Change Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI TITLE NAME STREET ADD TITLE NAME STREET ADD TITLE NAME STREET ADD TITLE NAME STREET ADD	DRESS DRESS P DRESS	ADD		ICERS AND	DIRECTOR Change Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI TITLE NAME	DRESS P DRESS P DRESS P	ADD		ICERS AND	DIRECTOR Change Change Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI TITLE NAME	DRESS P DRESS P DRESS P DRESS	ADD		ICERS AND	DIRECTOR Change Change Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	Delete Delete Delete	TITLE NAME STREET ADD CITY-ST-ZI TITLE NAME STREET ADD STREET ADD	DRESS P DRESS P DRESS P DRESS	ADD		FICERS AND	DIRECTOR Change Change Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI TITLE NAME	DRESS P DRESS P DRESS P	ADD		FICERS AND	DIRECTOR Change Change Change	Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P BRITTAIN, 3721 DOW NO FT MY ST BRITTAIN, 3721 DOW	OFFICERS F.T. NWIND LANE ERS FL 33917 PATSY M. NWIND LANE	AND DIRECTO	Delete Delete Delete	TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI TITLE NAME	DRESS P DRESS P DRESS P	ADD		FICERS AND	DIRECTOR Change Change Change	Addition Addition Addition	

I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: