2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008
Secretary of State

DOCUMENT# 703793

Entity Name: SOUTHERN FRUIT DISTRIBUTORS FUND, INC.

Current Principal Place of Business:

102 PINELOCH AVE
STE 10
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 568367
ORLANDO, FL 32856 US

New Mailing Address:

FEI Number: 59-1002700 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARUSO, JAMES P.
102 W PINELOCH AVE, STE 10
ORLANDO, FL 32806 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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	CARUSO SR., AUSTIN A, .	
Address:	102 W PINELOCH AVE., STE 10	
City-St-Zip:	ORLANDO, FL 32806	
Title:	D	( ) Delete
Name:	LARUE, JUDITH	
Address:	102 W PINELOCH AVE., STE 10	
City-St-Zip:	ORLANDO, FL 32806	
Title:	D	( ) Delete
Name:	CARUSO SR., PHILIP P, .	
Address:	102 W PINELOCH AVE, STE 10	
City-St-Zip:	ORLANDO, FL 32806	
Title:	D	( ) Delete
Name:	CARUSO, J. PAUL,	
Address:	102 W PINELOCH AVE., STE 10	
City-St-Zip:	ORLANDO, FL 32806	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES CARUSO P 03/06/2008

Electronic Signature of Signing Officer or Director — Date