

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jul 24, 2009  
Secretary of State**

DOCUMENT# 735474

Entity Name: EVER'MAN NATURAL FOODS CO-OP, INC.

**Current Principal Place of Business:**315 W GARDEN ST  
PENSACOLA, FL 32502**New Principal Place of Business:****Current Mailing Address:**315 W GARDEN ST  
PENSACOLA, FL 32502**New Mailing Address:**

FEI Number: 59-1726593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**MITCHELL, WILLIAM R  
125 S. ALCANIZ STREET  
SUITE 1  
PENSACOLA, FL 32501 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: P ( ) Delete  
Name: STANFORD, EDWARD J  
Address: 3343 WELLINGTON RD  
City-St-Zip: PENSACOLA, FL 32504Title: VP ( ) Delete  
Name: THOMAS, RICHARD  
Address: 10728 LILLIAN HIGHWAY  
City-St-Zip: PENSACOLA, FL 32506Title: S ( ) Delete  
Name: SCHNEIDER, ERIC  
Address: 5322 MORGAN RIDGE DRIVE  
City-St-Zip: MILTON, FL 32570Title: D ( ) Delete  
Name: WILLEY, JOHN  
Address: 1543 CYPRESS BEND TRAIL  
City-St-Zip: GULF BREEZE, FL 32563Title: D ( ) Delete  
Name: DEBLANDER, DAVE  
Address: 5 SEASHORE DRIVE  
City-St-Zip: PENSACOLA BEACH, FL 32561Title: T ( ) Delete  
Name: VORTHMANN, DAWN  
Address: 1519 N. A STREET  
City-St-Zip: PENSACOLA, FL 32501**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: VP (X) Change ( ) Addition  
Name: SOUTHERN, LAUREN  
Address: 1115 W. CHASE STREET  
City-St-Zip: PENSACOLA, FL 32501Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D (X) Change ( ) Addition  
Name: KOVACH, MICHAEL  
Address: 1264 MAZUREK BLVD.  
City-St-Zip: PENSACOLA, FL 32514Title: ( ) 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: EDWARD J. STANFORD

PRES

07/24/2009

Electronic Signature of Signing Officer or Director

Date