## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#827679**

Entity Name: TROPICANA TRANSPORTATION CORP

FILED Apr 29, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
C/O PEPSICO, INC. ATTENTION: TAX DEPT. PURCHASE, NY 10577				C/O PEPSICO, INC. TAX DEPT. 1/3 138 PURCHASE, NY 10577		
Current Mailing Address:				New Mailing Address:		
	ICO, INC. RSON HILL R E, NY 10577	OAD				
FEI Number:	59-1272753	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1200 S. PIN	ORATION SYS NE ISLAND RO ON, FL 33324	DAD				
	named entity : e of Florida.	submits this statement for the pur	rpose of	f changing it	s registered o	office or registered agent, or both,
SIGNATUR	RE:					
	Electror	nic Signature of Registered Agen	t			Date
Election Can	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P ( ) SHEARSON, G 1001 13TH AVE BRADENTON, I	E		Title: Name: Address: City-St-Zip:	P (X CAMPBELL, N 1001 13TH AV BRADENTON,	EE
Title: Name: Address: City-St-Zip:	DVS ( ) HUNTER, KARE 555 W MONRO CHICAGO, IL 6	E ST		Title: Name: Address: City-St-Zip:	DVPS (X HUNTER, KAR 555 W MONRO CHICAGO, IL	DE ST
Title: Name: Address: City-St-Zip:	AS ( ) BERGMAN, SA 700 ANDERSO PURCHASE, N	N HILL ROAD		Title: Name: Address: City-St-Zip:	(	) Change ()Addition
Title: Name: Address: City-St-Zip:	AS ( ) SALCITO, THO 700 ANDERSO PURCHASE, N	N HILL ROAD		Title: Name: Address: City-St-Zip:	AT (X SALCITO, THO 700 ANDERSO PURCHASE, N	ON HILL ROAD
Title: Name: Address: City-St-Zip:		) Delete		Title: Name: Address: City-St-Zip:	AT ( MUELLER, CH 700 ANDERSO PURCHASE, N	ON HILL ROAD
Title: Name: Address: City-St-Zip:	( )	) Delete		Title: Name: Address: City-St-Zip:	DVPC ( RILEY, JOHN 1001 13TH AV BRADENTON,	

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: CHARLES MUELLER AT 04/29/2009