2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001594

Entity Name: BAKE-N-JOY FOODS, INC.

FILED Jan 25, 2005 Secretary of State

Current P	e of Business:	New Prin	New Principal Place of Business:			
	OW STREET S NDOVER, MA					
Current N	lailing Addre	ss:	New Mail	New Mailing Address:		
	OW STREET S NDOVER, MA					
FEI Number: 04-2428824 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	d Address of (Current Registered Agent:	Name and	d Address	of New Registered Agent:	
1201 HAYS TALLAHAS	S STREET SSEE, FL 323		nurnose of changing	its registe	red office or registered agent, or both,	
	e of Florida.	submits this statement for the	purpose or changing	its registe	red office of registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	TORS:	ADDITIO	NS/CHAN	GES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	AKE, MARK A 351 WILLOW) Delete STREET SOUTH /ER, MA 01845	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SHEPHERD, A	STREET SOUTH	Title: Name: Address: City-St-Zip:	351 WILI	(X) Change () Addition RD, ALICE G LOW STREET SOUTH INDOVER, MA	
Title: Name: Address: City-St-Zip:	OGAN, ROBER 351 WILLOW) Delete RT M STREET SOUTH /ER, MA 01845	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	OGAN, GERÂL	STREET SOUTH	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	FREGONE, GE	STREET SOUTH	Title: Name: Address: City-St-Zip:	351 WILI	(X) Change () Addition IE, GEORGE A LOW STREET SOUTH INDOVER, MA	
Title: Name: Address: City-St-Zip:	WALDRON, JA 351 WILLOW		Title: Name: Address: City-St-Zip:	351 WILI	(X) Change () Addition DN, JACK W LOW ST. INDOVER, MA 01845	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALICE G. SHEPHERD VP 01/25/2005