


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007 08:00 AM
Secretary of State

DOCUMENT # F04000003903	
1. Entity Name FOOD MASTERS, INC.	

Principal Place of Business 35647 HIGHWAY 27 HAINES CITY, FL 33845	Mailing Address PO BOX 58399 RALEIGH, NC 27658-0399
--	---

DO NOT WRITE IN THIS SPACE



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 56-1189353	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MOORE, LYMAN D 35647 HIGHWAY 27 HAINES CITY, FL 33845

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP MOORE, RONALD L 8700 SOUTHAMPTON DRIVE RALEIGH, NC 27615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCVP MOORE, THOMAS W 1521 HUNTING RIDGE ROAD RALEIGH, NC 27615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BLEVINS, KENNETH E 1523 CRENSHAW POINT WAKE FOREST, NC 27587
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CASTEEN, WILLIAM R 8204 KINGSWOOD COURT RALEIGH, NC 276134208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000578304
01/08/07-80024-004 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: W.R. CASTEEN, Asst. Sec. - Treas 01/04/2007 919.876.0957

W.R. CASTEEN