## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000004588

**FILED** Feb 22, 2008 Secretary of State

Entity Name: COUSINS DISTRIBUTING, INC. **Current Principal Place of Business: New Principal Place of Business:** 4477 PARK ROAD 765 D EUBANKS DRIVE BENICIA, CA 94510 VACAVILLE, CA 95688 **Current Mailing Address: New Mailing Address:** 4477 PARK ROAD 765 D EUBANKS DRIVE BENICIA, CA 94510 VACAVILLE, CA 95688 FEI Number: 68-0419992 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition BALDWIN, MARK A BALDWIN, MARK A Name: Name:

Title:

Name:

Address:

City-St-Zip:

( ) Delete

ROSCOE, MARILYN J

4477 PARK ROAD

BENICIA, CA 94510

4477 PARK ROAD 765 D EUBANKS DRIVE Address: Address: City-St-Zip: BENICIA, CA 94510 City-St-Zip: VACAVILLE, CA 95688 Title: VTD Title: VTD (X) Change ( ) Addition () Delete Name: ROSCOE, JANE A Name: ROSCOE, JANE A 4477 PARK ROAD 765 D EUBANKS DRIVE Address: Address: BENICIA, CA 94510 VACAVILLE, CA 95688 City-St-Zip: City-St-Zip:

> Title: (X) Change ( ) Addition

Name: ROSCOE, MARILYN J 765 D EUBANKS DRIVE Address: City-St-Zip: VACAVILLE, CA 95688

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: MARK BALDWIN **PRES** 02/22/2008