

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09030

FILED
Jan 29, 2009
Secretary of State

Entity Name: AKIN & PORTER PRODUCE OF PLANT CITY, INC.

Current Principal Place of Business:

UNIT 1 FARMERS MARKET
PLANT CITY, FL 33566

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1082
PLANT CITY, FL 33564

New Mailing Address:

FEI Number: 59-2049399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERSON, LEVAUGHN
1400 W. MARTIN LUTHER KING BLVD.
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

AMERSON, LEVAUGHN
3512 N. YOUNG ROAD
PLANT CITY, FL 33565 US

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: LEVAUGHN AMERSON

01/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PORTER, JAMES,
Address: POST OFFICE BOX D N/A
City-St-Zip: GREENFIELD, TN

Title: DP () Delete
Name: AMERSON, LEVAUGHN,
Address: 1400 W. MARTIN LUTHER KING
City-St-Zip: PLANT CITY, FL 33566

Title: ST () Delete
Name: PERKINS, JEFF
Address: P.O. D (HWY 45)
City-St-Zip: GREENFIELD, TN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: AMERSON, LEVAUGHN,
Address: 3512 N. YOUNG ROAD
City-St-Zip: PLANT CITY, FL 33565

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEVAUGHN AMERSON

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01/29/2009

Electronic Signature of Signing Officer or Director

Date