

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F28864

Entity Name: FRUITREE, INC.

FILED  
Aug 17, 2009  
Secretary of State

## Current Principal Place of Business:

SUSAN BAGLEY HOCHINS  
28019 US HWY 27 SOUTH, P.O. BOX 939  
DUNDEE, FL 33838

## New Principal Place of Business:

LAURA ANNE BOWEN  
28019 US HWY 27 SOUTH  
DUNDEE, FL 33838

## Current Mailing Address:

SUSAN BAGLEY HOCHINS  
28019 US HWY 27 SOUTH, P.O. BOX 939  
DUNDEE, FL 33838

## New Mailing Address:

LAURA ANNE BOWEN  
28019 US HWY 27 SOUTH  
DUNDEE, FL 33838

FEI Number: 59-2095381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUSAN BAGLEY HOCHINS  
28019 US HWY 27 SOUTH, P.O. BOX 236  
DUNDEE, FL 33838 US

## Name and Address of New Registered Agent:

LAURA ANNE BOWEN  
28019 US HWY 27 SOUTH  
DUNDEE, FL 33838 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: LAURA ANNE BOWEN

08/17/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: SUSAN BAGLEY HOCHINS  
Address: 28019 US HWY 27 SOUTH, BOX 236  
City-St-Zip: DUNDEE, FL

Title: T ( ) Delete  
Name: SUSAN BAGLEY HOCHINS  
Address: 28019 US HWY 27 SOUTH, BOX 236  
City-St-Zip: DUNDEE, FL 33838

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: LAURA ANNE BOWEN  
Address: 28019 US HWY 27 SOUTH  
City-St-Zip: DUNDEE, FL

Title: T (X) Change ( ) Addition  
Name: LAURA ANNE BOWEN  
Address: 28019 US HWY 27 SOUTH  
City-St-Zip: DUNDEE, FL 33838

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: LAURA ANNE BOWEN

CEO

08/17/2009

Electronic Signature of Signing Officer or Director

Date