

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G91396

FILED
Mar 25, 2009
Secretary of State

Entity Name: RALPH BUTLER PRODUCE, INC.

Current Principal Place of Business:

% RALPH OWEN BUTLER
12519 NICOLETTE CT
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

% RALPH OWEN BUTLER
12519 NICOLETTE CT
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 59-2383950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, RALPH OWEN
12519 NICOLETTE CT
CLERMONT, FL 32711 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: BUTLER, RALPH OWEN,
Address: 12519 NICOLETTE CT
City-St-Zip: CLERMONT, FL

Title: TD () Delete
Name: BUTLER, RUTH ANN,
Address: 12519 NICOLETTE CT
City-St-Zip: CLERMONT, FL

Title: S () Delete
Name: DAVIDSON, LISA R
Address: 590 LAKESHORE DR
City-St-Zip: CLERMONT, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: RALPH BUTLER

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date