

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K36796

FILED
Jan 13, 2009
Secretary of State

Entity Name: ALLEN & GLEASON CONFECTIONERY FOOD BROKERS, INC.

Current Principal Place of Business:

708 PENNYROYAL PL
BRANDON, FL 33510 US

New Principal Place of Business:

Current Mailing Address:

708 PENNYROYAL PL
BRANDON, FL 33510 US

New Mailing Address:

FEI Number: 59-2914721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS ALLEN, SHARI
708 PENNYROYAL PL
BRANDON, FL 33510 US

Name and Address of New Registered Agent:

ALLEN, SHARI SIMMONS
708 PENNYROYAL PL
BRANDON, FL 33510 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: SHARI SIMMONS ALLEN 01/13/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALLEN, SHARI S
Address: 708 PENNYROYAL PL
City-St-Zip: BRANDON, FL 33510

Title: VP () Delete
Name: COCHRAN, MICHAEL
Address: 1271 NW 48TH STREET
City-St-Zip: POMPANO BEACH, FL 33064

Title: T () Delete
Name: ALLEN, SHARI S
Address: 708 PENNYROYAL PL
City-St-Zip: BRANDON, FL 33510

Title: S () Delete
Name: COCHRAN, MICHAEL
Address: 1271 NW 48 TH STREET
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ALLEN, SHARI SIMMONS
Address: 708 PENNYROYAL PL
City-St-Zip: BRANDON, FL 33510

Title: VP (X) Change () Addition
Name: COCHRAN, MICHAEL R
Address: 1271 NW 48TH STREET
City-St-Zip: POMPANO BEACH, FL 33064

Title: TR (X) Change () Addition
Name: ALLEN, SHARI SIMMONS
Address: 708 PENNYROYAL PL
City-St-Zip: BRANDON, FL 33510

Title: SEC (X) Change () Addition
Name: COCHRAN, MICHAEL R
Address: 1271 NW 48 TH STREET
City-St-Zip: POMPANO BEACH, FL 33064

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: SHARI SIMMONS ALLEN PRES 01/13/2009
Electronic Signature of Signing Officer or Director Date