

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K74642

Entity Name: MODICA'S MARKET, INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

109 SEASIDE CENTRAL SQUARE
SANTA ROSA BEACH, FL 32549 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 4639
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 62-1415588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MODICA MARKET, INC.
P.O. BOX 4639
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

MODICA MARKET, INC.
109 SEASIDE CENTRAL SQUARE
SANTA ROSA BEACH, FL 32459 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: CHARLES MODICA

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MODICA, CHARLES,
Address: 185 E. MITCHELL AVE.
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: PSTD () Delete
Name: MODICA, SARAH,
Address: 185 E. MITCHELL AVE.
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: VP () Delete
Name: MODICA, CHARLES, JR.,
Address: 258 DOGWOOD ST.
City-St-Zip: SEAGROVE BEACH, FL 32459 US

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 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: CHARLES MODICA

VP

01/05/2007

Electronic Signature of Signing Officer or Director

Date