

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006428

FILED  
Jul 19, 2006  
Secretary of State

Entity Name: FOOD FOR EVER, INC.

## Current Principal Place of Business:

1113 W. UNIVERSITY AVE  
GAINESVILLE, FL 32601

## New Principal Place of Business:

## Current Mailing Address:

1113 W. UNIVERSITY AVE  
GAINESVILLE, FL 32601

## New Mailing Address:

FEI Number: 59-3670122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

ALLARD, GREG  
13810 W. S.R. 235  
APT 3  
ALACHUA, FL 32615 US

## Name and Address of New Registered Agent:

ALLARD, GREG  
818 SE 1ST AVE  
GAINESVILLE, FL 32601 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: GREORY C. ALLARD

07/19/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ALLARD, GREG  
Address: 13810 W. S.R. 235, APT 3  
City-St-Zip: ALACHUA, FL 32615

Title: ST ( ) Delete  
Name: LIMA, GLAUCIA  
Address: PO BOX 436  
City-St-Zip: ALACHUA, FL 32616

Title: ST ( ) Delete  
Name: DUARTE, MARIA  
Address: 724 S.E. 1ST AVE  
City-St-Zip: GAINESVILLE, FL 32601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ALLARD, GREG  
Address: 818 SE 1ST AVE  
City-St-Zip: GAINESVILLE, FL 32601 US

Title: ST (X) Change ( ) Addition  
Name: LIMA, GLAUCIA H  
Address: PO BOX 436  
City-St-Zip: ALACHUA, FL 32616

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

SIGNATURE: GREGORY C. ALLARD

PD

07/19/2006

Electronic Signature of Signing Officer or Director

Date