

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002564

FILED
Jan 16, 2005
Secretary of State

Entity Name: CHILD NUTRITION SPONSORS, INC.

Current Principal Place of Business:

4383 SEABREEZE DR
JACKSONVILLE, FL 32250

New Principal Place of Business:

Current Mailing Address:

4383 SEABREEZE DR
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 02-0580264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARFEL, RICHARD H
4383 SEABREEZE DR
JACKSONVILLE, FL 32250 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WARFEL, JOANNA T
Address: 4383 SEABREEZE DR
City-St-Zip: JACKSONVILLE, FL 32250

Title: D () Delete
Name: MINGE, JOHN H III
Address: 10150 BELLE RIVE BLVD #2111
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: WILLIAMS, DERYA E
Address: 11447 SARASOTA LN
City-St-Zip: JACKSONVILLE, FL 32218

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 Section 119.07(3)(i), 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: JOANNA T. WARFEL

PD

01/16/2005

Electronic Signature of Signing Officer or Director

Date