## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000004979

Entity Name: FAIR FOOD AMERICA, INC.

FILED Jul 16, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

736 FORESTVIEW DR. 1310 REFLECTIONS WAY SARASOTA, FL 34232 IMMOKALEE, FL 34142

**Current Mailing Address: New Mailing Address:** 

1310 REFLECTIONS WAY PO BOX 51482 IMMOKALEE, FL 34142 SARASOTA, FL 34232

FEI Number: 04-3635046 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: Name and Address of New Registered Agent:

MALONI, DAVID NOGAJ, RICHARD J 736 FORESTVIEW DR. 1310 RÉFLECTIONS WAY SARASOTA, FL 34232 US IMMOKALEE, FL 34142

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: RICHARD J. NOGAJ 07/16/2007

> Electronic Signature of Registered Agent Date

> > Title:

**VSTD** 

## **OFFICERS AND DIRECTORS:**

VPD

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete MALONI, DAVID NOGAJ, RICHARD J Name: Name: 736 FORESTVIEW DR. Address: 1310 REFLECTIONS WAY Address:

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: IMMOKALEE, FL 34142

(X) Change ( ) Addition () Delete Name: NOEM, JOSH Name: NOGAJ, FLORENCE A Address: 9649 N. FISKE AVE. Address: 1310 REFLECTIONS WAY City-St-Zip: PORTLAND, OR 97203 City-St-Zip: IMMOKALEE, FL 34142

Title: () Delete Title: (X) Change ( ) Addition

MALONI, JULIÉ A MALONI, DAVID Name: Name: 736 FORESTVIEW DR. 736 FORESTVIEW DR. Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

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

SIGNATURE: FLORENCE A. NOGAJ **VSTD** 07/16/2007