

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003561

FILED  
Feb 01, 2011  
Secretary of State

**Entity Name:** THE FLORIDA EAST COAST SHRIMP PRODUCERS, INC.

**Current Principal Place of Business:**

95289 NASSAU RIVER RD  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

FLORIDA E. COAST SHRIMP PRODUCERS  
P.O. BOX 373  
YULEE, FL 32041

**New Mailing Address:**

**FEI Number:** 20-0017437      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

JACOBS, ARTHUR I PA  
961687 GATEWAY BLVD  
SUITE 201 I  
FERNANDINA BEACH, FL 32034 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: PD  
Name: WILES, SONNY J  
Address: 4986 HECKSHER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VPD  
Name: THOMPSON, E. ANDREW SR.  
Address: 1415 BROAD ST- B  
City-St-Zip: MAYPORT, FL 32233

Title: SD  
Name: RODRIGUEZ, SONIA  
Address: 10350 NW 32ND AVE  
City-St-Zip: MIAMI, FL 331471102

Title: TD  
Name: CHEW, THOMAS J  
Address: 5006 HECKSCHER DR.  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VPD  
Name: AUTORE, SANDRA J  
Address: 85462 AVANT ROAD  
City-St-Zip: YULEE, FL 32097

I hereby 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 all other like empowered.

SIGNATURE: SONNY J WILES SR.

PD

02/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date