

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05409

FILED  
Apr 01, 2009  
Secretary of State

**Entity Name:** FLORIDA GROCERY MANUFACTURERS' REPRESENTATIVES, INC.

**Current Principal Place of Business:**

5118 N 56TH ST  
SUITE 136  
TAMPA, FL 33610

**New Principal Place of Business:**

5650 BRECKENRIDGE  
SUITE 301  
TAMPA, FL 33610

**Current Mailing Address:**

5118 N 56TH ST  
SUITE 136  
TAMPA, FL 33610

**New Mailing Address:**

P.O. BOX 10684  
TAMPA, FL 33679

**FEI Number:** 59-2452572

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LABARBERA, MICHAEL D.  
1907 W. KENNEDY BLVD.  
TAMPA, FL 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: C ( ) Delete  
Name: GAIL, TAMMY  
Address: 2085 COUNTY RD 753 SOUTH  
City-St-Zip: WEBSTER, FL 33597

Title: VP ( ) Delete  
Name: LISTA, J  
Address: 7566 20TH ST. NO  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: DYER, LINDA  
Address: 12529 DAWN VISTA DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: P ( ) Delete  
Name: JENKINS, FERRELL  
Address: 5118 N 56TH ST - STE 136  
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete  
Name: GRIFFIN, CINDY  
Address: 3025 WHITTEN RD  
City-St-Zip: LAKELAND, FL 33811

Title: D ( ) Delete  
Name: MCQUEEN, BOBBY  
Address: 2515 DRANE FIELD RD  
City-St-Zip: LAKELAND, FL 33811

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C (X) Change ( ) Addition  
Name: LISTA, JEFF  
Address: 7566 20TH ST. NO  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: P (X) Change ( ) Addition  
Name: WHALEN, HEATHER  
Address: 16335 IVY LAKE DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: T (X) Change ( ) Addition  
Name: DYER, LINDA  
Address: 12529 DAWN VISTA DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: VP (X) Change ( ) Addition  
Name: AARON, MARCIE  
Address: 107 HILLTOP DRIVE  
City-St-Zip: WINTER HAVEN, FL 33881

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 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: HEATHER WHALEN

P

04/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date