

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008203

FILED  
Jul 08, 2007  
Secretary of State

Entity Name: WEST ORANGE FOOD PANTRY INC.

## Current Principal Place of Business:

120 W MCKEY STREET  
OCOE, FL 34761

## New Principal Place of Business:

452 PALM DR.  
OCOE, FL 34761

## Current Mailing Address:

120 W MCKEY STREET  
OCOE, FL 34761

## New Mailing Address:

452 PALM DR  
OCOE, FL 34761

FEI Number: 20-5321794      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:

TORRES, MERALY  
120 W MCKEY STREET  
OCOE, FL 34761      US

## Name and Address of New Registered Agent:

ARTIGAS, KENNETH  
31917 ORANGE ST  
SORRENTO, FL 32776      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: KENNETH ARTIGAS

07/08/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DIR      ( ) Delete  
Name: SARMIENTO, CARLOS  
Address: 22717 STALLION DRIVE  
City-St-Zip: SORRENTO, FL 32776

Title: DIR      ( ) Delete  
Name: ARTIGAS, KEN  
Address: 631 QUEENSBRIDGE DRIVE  
City-St-Zip: OCOE, FL 34761

Title: DIR      ( ) Delete  
Name: SARMIENTO, EMILY  
Address: 22717 STALLION DRIVE  
City-St-Zip: SORRENTO, FL 32776

Title: PRES      (X) Delete  
Name: SARMIENTO, CARLOS  
Address: 22717 STALLION DRIVE  
City-St-Zip: SORRENTO, FL 32776

Title: VP      (X) Delete  
Name: ARTIGAS, KEN  
Address: 631 QUEENSBRIDGE DRIVE  
City-St-Zip: OCOE, FL 34761

Title: SEC      (X) Delete  
Name: SARMIENTO, EMILY  
Address: 22717 STALLION DRIVE  
City-St-Zip: SORRENTO, FL 32776

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES      (X) Change ( ) Addition  
Name: SARMIENTO, CARLOS  
Address: 22717 STALLION DRIVE  
City-St-Zip: SORRENTO, FL 32776

Title: DIR      (X) Change ( ) Addition  
Name: MILLER, ROGER  
Address: 668 BRUSHCREEK BLVD  
City-St-Zip: OCOE, FL 34761

Title: DIR      (X) Change ( ) Addition  
Name: DAVID, BRALAND  
Address: POST OFFICE BOX 751  
City-St-Zip: OAKLAND, FL 34760

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 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: CARLOS SARMIENTO

DIR

07/08/2007

Electronic Signature of Signing Officer or Director

Date