

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011511

FILED
Apr 14, 2009
Secretary of State

Entity Name: PANHANDLE FRESH MARKETING ASSOCIATION, INC.

Current Principal Place of Business:

6491 CAROLINE STREET
SUITE 4
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

6491 CAROLINE STREET
SUITE 4
MILTON, FL 32570

New Mailing Address:

FEI Number: 20-8523081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, CINDY W
6491 CAROLINE STREET
SUITE 4
MILTON, FL 32570 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: DAT () Delete
Name: ANDERSON, CINDY W
Address: 6491 CAROLINE STREET, SUITE 4
City-St-Zip: MILTON, FL 32570

Title: DC () Delete
Name: GRAY, ED III
Address: 315 FAIRPOINT DRIVE
City-St-Zip: GULF BREEZE, FL 32574

Title: DT () Delete
Name: BAKER, DICK
Address: 6491 CAROLINE ST STE 4
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AT (X) Change () Addition
Name: ANDERSON, CINDY W
Address: 6491 CAROLINE STREET, SUITE 4
City-St-Zip: MILTON, FL 32570

Title: C (X) Change () Addition
Name: GRAY, ED III
Address: 315 FAIRPOINT DRIVE
City-St-Zip: GULF BREEZE, FL 32574

Title: T (X) Change () Addition
Name: BAKER, DICK
Address: 6491 CAROLINE ST STE 4
City-St-Zip: MILTON, FL 32570

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: CINDY W. ANDERSON

AT

04/14/2009

Electronic Signature of Signing Officer or Director

Date