

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000017

FILED  
May 01, 2009  
Secretary of State

Entity Name: PLANT CITY LIL RAIDERS, INC.

**Current Principal Place of Business:**

1305 COWART ROAD  
PLANT CITY, FL 33567

**New Principal Place of Business:**

**Current Mailing Address:**

1305 COWART ROAD  
PLANT CITY, FL 33567

**New Mailing Address:**

FEI Number: 75-3222108      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:**

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

FREEMAN, JEFFREY  
1305 COWART ROAD  
PLANT CITY, FL 33567      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: FREEMAN, JEFFREY  
Address: 1305 COWART ROAD  
City-St-Zip: PLANT CITY, FL 33567

Title: VD      ( ) Delete  
Name: FREEMAN, BELINDA  
Address: 1305 COWART ROAD  
City-St-Zip: PLANT CITY, FL 33567

Title: STD      ( ) Delete  
Name: ARNOLD, HOLLY  
Address: 806 N. WILDER ROAD  
City-St-Zip: PLANT CITY, FL 33563

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD      (X) Change ( ) Addition  
Name: BROWN, HOLLY  
Address: 3424 MOUNT TABOR ROAD  
City-St-Zip: LAKELAND, FL 33810

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: BELINDA FREEMAN

VD

05/01/2009

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

\_\_\_\_\_  
Date