

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17191

FILED
Feb 24, 2009
Secretary of State

Entity Name: SOUTH COUNTY FOOD PANTRY, INC.

Current Principal Place of Business:

800 SOUTH TAMIAMI TRAIL
VENICE, FL 34285

New Principal Place of Business:

790 SOUTH TAMIAMI TRAIL
VENICE, FL 34285

Current Mailing Address:

790 S. TAMIAMI TR.
VENICE, FL 342853601

New Mailing Address:

FEI Number: 65-0007133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLF, JOHN
3799 CADBURY CIR, #321
VENICE, FL 34293 US

Name and Address of New Registered Agent:

RYAN, MARY ELLEN
19 GULF MANOR DRIVE
VENICE, FL 34285 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: MARY ELLEN RYAN 02/24/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: MCCLELAND, JAMES REV
Address: 4730 HERON DR
City-St-Zip: VENICE, FL 34293

Title: VCD () Delete
Name: DEBORAH, GIPPERT
Address: 740 SAWRASS BRIDGE RD.
City-St-Zip: VENICE, FL 34292

Title: SD () Delete
Name: GIPPERT, MICHAEL
Address: 740 SAWGRASS BRIDGE RD
City-St-Zip: VENICE, FL 34292

Title: TD () Delete
Name: WOLF, JOHN,
Address: 303 GONDALA PARK DRIBE
City-St-Zip: VENICE, FL 34292

Title: SD () Delete
Name: JOAN, LILLY
Address: 319 AUBURN WOODS CIR
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: SLOAN, RICHARD
Address: 1107 HARBOR TOWNE WAY
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: DEBORAH, GIPPERT
Address: 740 SAWRASS BRIDGE RD.
City-St-Zip: VENICE, FL 34292

Title: VCD (X) Change () Addition
Name: GIPPERT, MICHAEL
Address: 740 SAWGRASS BRIDGE RD
City-St-Zip: VENICE, FL 34292

Title: TD (X) Change () Addition
Name: RYAN, MARY ELLEN,
Address: 19 GULF MANOR DR
City-St-Zip: VENICE, FL 34285

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

Title: D (X) Change () Addition
Name: WILLIAMSON, TRUDY
Address: 150 CIPRIANI WAY
City-St-Zip: NORTH VENICE, FL 34275

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: MARY ELLEN RYAN TD 02/24/2009
Electronic Signature of Signing Officer or Director Date