## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31693

FILED Apr 26, 2006 Secretary of State

Entity Name: NORTH FLORIDA FROZEN AND REFRIGERATED FOOD ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
1007 LARKSPUR LOOP JACKSONVILLE, FL 32259 US				1860 C COPPERSTONE DRIVE ORANGE PARK, FL 320034009 US			
Current Mailing Address:				New Mailing Address:			
1007 LARKSPUR LOOP JACKSONVILLE, FL 32259 US				1860 C COPPERSTONE DRIVE ORANGE PARK, FL 320034009 US			
El Number:	: 59-2997740	FEI Number Applied For ( )	FEI Numl	ber Not Appl	icable ( )	Certificate of Status I	Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
TAMAN, DONALD H 1007 LARKSPUR LOOP JACKSONVILLE, FL 32259 US				TAMAN, DONALD H 1860 C COPPERSTONE DRIVE ORANGE PARK, FL 320034009 US			
	named entity s e of Florida.	ubmits this statement for the	purpose of	changing i	ts registered o	office or registered ag	gent, or both,
SIGNATURE: DONALD H TAMAN				04/26/2006			
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Fitle: Name: Address: City-St-Zip:	BRYAN, DANNY	TRAIL, 104 HAMILTON BLDG.	1	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Fitle: Name: Address: City-St-Zip:	INGRAM, DENN	S BAY HIGHWAY	1	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Fitle: Name: Address: City-St-Zip:	D () TAMAN, DONAL 1007 LARKSPU JACKSONVILLE	R LOOP	1	Title: Name: Address: City-St-Zip:	TAMAN, DONAI 1860 C COPPE	) Change ( ) Addition LD H ERSTONE DRIVE K, FL 320034009 US	

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD H TAMAN D 04/26/2006