

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32239

FILED  
Mar 07, 2008  
Secretary of State

**Entity Name:** TREASURE COAST FOOD BANK, INCORPORATED

**Current Principal Place of Business:**

3051 INDUSTRIAL 25TH STREET  
FORT PIERCE, FL 34946

**New Principal Place of Business:**

**Current Mailing Address:**

3051 INDUSTRIAL 25TH STREET  
FORT PIERCE, FL 34946

**New Mailing Address:**

**FEI Number:** 65-0123281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALEXANDER, LAURA D  
3051 INDUSTRIAL 25TH STREET  
FORT PIERCE, FL 34946 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: D ( ) Delete  
Name: CAPOCCIA, LEO  
Address: 207 INDIAN HILLS DR  
City-St-Zip: FT PIERCE, FL 34982

Title: P ( ) Delete  
Name: MELVIN, HUBERT  
Address: 337 N FOURTH STREET  
City-St-Zip: FT. PIERCE, FL 34950

Title: TD ( ) Delete  
Name: SPECTOR, DIANE L  
Address: 130 S. ENTRADA AVE  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: ED ( ) Delete  
Name: ALEXANDER, LAURA D  
Address: 3051 INDUSTRIAL 25TH STREET  
City-St-Zip: FORT PIERCE, FL 34946

Title: VP ( ) Delete  
Name: PADRICK, THOMAS  
Address: 10400 S.W. VILLAGE CENTER DR  
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: S ( ) Delete  
Name: TYRE, MITCHELL  
Address: 27 S.E. OCEAN BLVD  
City-St-Zip: STUART, FL 34994

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

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

Title: P (X) Change ( ) Addition  
Name: PADRICK, THOMAS  
Address: 10400 S.W. VILLAGE CENTER DR  
City-St-Zip: PORT ST. LUCIE, FL 34987

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

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

Title: VP (X) Change ( ) Addition  
Name: WESTBURY, ANTHONY  
Address: 600 EDWARDS AVE  
City-St-Zip: FORT PIERCE, FL 34982

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: LAURA D. ALEXANDER

ED

03/07/2008

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

\_\_\_\_\_  
Date