

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000033286

Entity Name: BENSON'S GROCERY, INC.

FILED  
Mar 28, 2009  
Secretary of State

## Current Principal Place of Business:

27301 OLD US 41 ROAD, SE  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

## Current Mailing Address:

27301 OLD US 41 ROAD, SE  
BONITA SPRINGS, FL 34135

## New Mailing Address:

FEI Number: 59-3642044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARROW, PAUL L  
3501-312 DEL PRADO BLVD.  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

DEBONO, ALBERT C  
27301 OLD US 41  
BONITA SPRINGS, FL 34135 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: ALBERT C. DEBONO

03/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: DEBONO, ALBERT  
Address: 25130 SANDPIPER GREENS COURT #201  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S ( ) Delete  
Name: PASZEK, KENNETH  
Address: 27301 RICHVIEW CT.  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP ( ) Delete  
Name: DE BONO, ALLEN  
Address: 8165 EGRET ROAD  
City-St-Zip: FORT MYERS, FL 33912

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH J. PASZEK

S

03/28/2009

Electronic Signature of Signing Officer or Director

Date