

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023145

FILED  
Mar 01, 2006  
Secretary of State

Entity Name: CRYSTAL RIVER FOODSERVICE, INC.

## Current Principal Place of Business:

1677 SE HWY 19  
CRYSTAL RIVER, FL 34429

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 2267  
CHIEFLAND, FL 32644

## New Mailing Address:

3304 SW 34TH CIRCLE  
STE 103  
OCALA, FL 34474

FEI Number: 59-3709205

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BELL, STUART R  
163 NE 3RD STREET  
CHIEFLAND, FL 32626 US

## Name and Address of New Registered Agent:

BELL, STUART R  
3304 SW 34TH CIRCLE  
STE 103  
OCALA, FL 34474 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: STUART RYAN BELL

03/01/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BELL, STUART R  
Address: P.O. BOX 2267  
City-St-Zip: CHIEFLAND, FL 32644

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BELL, STUART R  
Address: 3304 SW 34TH CIRCLE, STE 103  
City-St-Zip: OCALA, FL 34474

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

SIGNATURE: STUART RYAN BELL

P

03/01/2006

Electronic Signature of Signing Officer or Director

Date