## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000024722

Entity Name: PETRO FOOD MARKET, INC.

DEFUNIAK SPRINGS, FL 32435

City-St-Zip:

FILED Mar 21, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1805 E. NELSON STREET DEFUNIAK SPRINGS, FL 32433 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 758 DEFUNIAK SPRINGS, FL 32435 FEI Number: 59-3701887 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KILLINGSWORTH, TOMMY 110 LEE ROAD DEFUNIAK SPRINGS, FL 32433 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete Title: () Change () Addition KILLINGSWORTH, TOMMY Name: Name: POST OFFICE BOX 758 Address: Address: City-St-Zip: DEFUNIAK SPRINGS, FL 32435 City-St-Zip: Title: () Delete Title: () Change () Addition Name: KILLINGSWORTH, TOMMY Name: POST OFFICE BOX 758 Address: Address:

City-St-Zip:

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: TOMMY KILLINGSWORTH P 03/21/2006