

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 21, 2005 8:00 am**  
**Secretary of State**

03-21-2005 90098 033 \*\*\*150.00

**DOCUMENT # P02000070014**

1. Entity Name

LIVINGSTON FOODS, INC.



Principal Place of Business

103 B. GULF DR. NORTH  
BRADENTON BEACH FL 34217

Mailing Address

4530 ABACOS PLACE  
BRADENTON FL 34203

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

103 B GULF DR. NORTH  
BRADENTON BEACH

Suite, Apt. #, etc.

City & State

BRADENTON BEACH  
BRADENTON BEACH

Zip

Country

Zip  
34217

Country

4. FEI Number

81-0557696

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

FINANCIAL FOUNDATIONS, INC.  
3150 SANDY RIDGE DRIVE  
CLEARWATER FL 33761

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME LIVINGSTON, CRAIG T  
STREET ADDRESS 4530 ABACOS PLACE  
CITY-ST-ZIP BRADENTON FL 34203

TITLE VP ☐ Delete  
NAME LIVINGSTON, JEANINE M  
STREET ADDRESS 4530 ABACOS PL.  
CITY-ST-ZIP BRADENTON FL 34203

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition  
NAME LIVINGSTON, CRAIG T  
STREET ADDRESS 6018 39TH COURT EAST  
CITY-ST-ZIP BRADENTON FL 34203

TITLE VP ☒ Change ☐ Addition  
NAME LIVINGSTON, JEANINE M  
STREET ADDRESS 6018 39TH COURT EAST  
CITY-ST-ZIP BRADENTON FL 34203

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #