

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000087197

FILED
Apr 03, 2009
Secretary of State

Entity Name: PLACIDA WHOLESALERS, INC.

Current Principal Place of Business:

3225 PLACIVA RD
#1
ENGLEWOOD, FL 34224

New Principal Place of Business:

3212 CINDY LANE
ENGLEWOOD, FL 34224

Current Mailing Address:

9200 PINE COVE RD
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 55-0885340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTS, GREGORY
9200 PINE COVE RD
ENGLEWOOD, FL 34224 US

Name and Address of New Registered Agent:

ROBERTS, GREGORY S
9200 PINE COVE RD
ENGLEWOOD, FL 34224 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: GREGORY S. ROBERTS

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBERTS, GREGORY S
Address: 9200 PINE COVE DR
City-St-Zip: ENGLEWOOD, FL 34224

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: ROBERTS, GREGORY S
Address: 9200 PINE COVE RD.
City-St-Zip: ENGLEWOOD, FL 34224

Title: SEC () Change (X) Addition
Name: ROBERTS, GREGORY S
Address: 9200 PINE COVE RD.
City-St-Zip: ENGLEWOOD, FL 34224

Title: TRES () Change (X) Addition
Name: ROBERTS, GREGORY S
Address: 9200 PINE COVE RD.
City-St-Zip: ENGLEWOOD, FL 34224

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: GREGORY S. ROBERTS

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date