

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128068

FILED  
Jan 27, 2004  
Secretary of State

Entity Name: WILLOW OAK FOOD MART INC

## Current Principal Place of Business:

4285 HWY 60 WEST  
MULBERRY, FL 33860

## New Principal Place of Business:

## Current Mailing Address:

4285 HWY 60 WEST  
MULBERRY, FL 33860

## New Mailing Address:

FEI Number: 33-1032360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KULANGARA, JAMES M  
4285 HWY 60 WEST  
MULBERRY, FL 33860 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: KULANGARA, RACHEL J  
Address: 4285 60 WEST  
City-St-Zip: MULBERRY, FL 33860

Title: VP ( ) Delete  
Name: KULANGARA, JAMES M  
Address: 4285 HWY 60 WEST  
City-St-Zip: MULBERRY, FL 33860

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: JAMES, JULIA M  
Address: 4285 60 WEST  
City-St-Zip: MULBERRY, FL 33860

Title: PD (X) Change ( ) Addition  
Name: KULANGARA, JAMES M  
Address: 4285 HWY 60 WEST  
City-St-Zip: MULBERRY, FL 33860

Title: SD ( ) Change (X) Addition  
Name: JAMES, JULIA M  
Address: 4285 HWY 60 WEST  
City-St-Zip: MULBERRY, FL 33860

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES KULANGARA

PD

01/27/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date