

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000132409

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Entity Name:** DAIRY CONNECTIONS MANAGEMENT, INC.

**Current Principal Place of Business:**

2209 NORTH 40TH. STREET  
TAMPA, FL 33605

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 5085  
TAMPA, FL 33675

**New Mailing Address:**

**FEI Number:** 74-3073233

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TATE, MARK T P.A.  
212 SOUTH MAGNOLIA AVE.  
TAMPA, FL 33606 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

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: GUAGLIARDO, SAL  
Address: 5807 MARINAR STREET  
City-St-Zip: TAMPA, FL 33609

Title: CFO  
Name: PAGE, DAN  
Address: 2209 N 40TH ST  
City-St-Zip: TAMPA, FL 33605

I hereby 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 all other like empowered.

SIGNATURE: S GUAGLIARDO

PSD

04/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date