## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000018453

7253 SUGAR PALM CT

FORT MYERS, FL 33912

Address:

City-St-Zip:

FILED Apr 09, 2007 Secretary of State

Entity Na	me: BIGMAN	CREAMERY, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6628 MAGNOLIA LN FT. MYERS, FL 33912			6628 MAGNOLIA LN FT. MYERS, FL 3396	6628 MAGNOLIA LN FT. MYERS, FL 339661523	
Current M	lailing Addre	ss:	New Mailing Addres	New Mailing Address:	
6628 MAG FT. MYER	NOLIA LN S, FL 33912				
FEI Number	: 20-0349635	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
BIGELOW, DAWN M 6628 MAGNOLIA LN FT. MYERS, FL 33912 US			BIGELOW, DAWN M 6628 MAGNOLIA LN FT. MYERS, FL 3396		
	named entity e of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE: DAWN M	1 BIGELOW		04/09/2007	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( BIGELOW, DA 6628 MAGNOL FT. MYERS, F	IA LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( HALLMAN, JAN 7253 SUGAR F FT. MYERS, F	PALM CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ( BIGELOW, DA 6628 MAGNOL FORT MYERS	IA LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T ( HALLMAN, JAN	) Delete ⁄II S	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE:	DAWN M BIGELOW	Р	04/09/2007