

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108275

Entity Name: CROWN PICKIN' PRODUCE, INC.

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

147 SKYLINE DR.
THOMASVILLE, GA 31757 US

New Principal Place of Business:

Current Mailing Address:

1723 SHADY LANE DR
LAKE WALES, FL 33898 US

New Mailing Address:

FEI Number: 20-0276297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, SALLIE C RA
1723 SHADY LANE DR
LAKE WALES, FL 33898 US

Name and Address of New Registered Agent:

WATSON, SALLIE C RA
7400 S. OCEAN DRIVE
E-102
JENSEN BEACH, FL 34957 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:

01/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WATSON, JOHN D PRES.
Address: 147 SKYLINE DR.
City-St-Zip: THOMASVILLE, GA 31757 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: WATSON, JOHN D PRES.
Address: 147 SKYLINE DR.
City-St-Zip: THOMASVILLE, GA 31757 US

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: JOHN D. WATSON

P/D

01/23/2009

Electronic Signature of Signing Officer or Director

Date