

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079581

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: DATE PALM WHOLESALERS, INC.

**Current Principal Place of Business:**

5255 SW 76TH AVENUE  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

16787 NE 35TH AVENUE  
N MIAMI BEACH, FL 33160

**New Mailing Address:**

FEI Number: 20-1158213

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWANSON, TODD MR  
16787 NE 35TH AVENUE  
N MIAMI BEACH, FL 33160 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: D ( ) Delete  
Name: SWANSON, TODD  
Address: 16787 NE 35TH AVENUE  
City-St-Zip: N MIAMI BEACH, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SWANSON, TODD  
Address: 16787 NE 35TH AVENUE  
City-St-Zip: N MIAMI BEACH, FL 33160

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: TODD SWANSON

PRES

04/24/2009

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

\_\_\_\_\_  
Date