

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000110290

FILED
Feb 18, 2011
Secretary of State

Entity Name: CUSTARD COVE CORPORATION

Current Principal Place of Business:

1233 NW AVE L
BELLE GLADE, FL 33430

New Principal Place of Business:

1225 NW AVE L
BELLE GLADE, FL 33430

Current Mailing Address:

1233 NW AVE L
BELLE GLADE, FL 33430

New Mailing Address:

1225 NW AVE L
BELLE GLADE, FL 33430

FEI Number: 59-2476529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPP, JIMMY L
657 TABIT RD
BELLE GLADE, FL 33430 US

Name and Address of New Registered Agent:

TRIPP, JIMMY L
5030 SE 128TH AVE
OKEECHOBEE, FL 34974 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: JIMMY L TRIPP

02/18/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: PERRYMAN, BARTON T
Address: 1190 NW 16TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: D
Name: TRIPP, JIMMY L
Address: 1225 NW AVE L
City-St-Zip: BELLE GLADE, FL 33430

Title: D
Name: TRIPP, H. LARUE
Address: 7400 LAUREL PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

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: JIMMY L TRIPP

D

02/18/2011

Electronic Signature of Signing Officer or Director

Date