

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000162801

Entity Name: WINCO SALES, INC.

**FILED**  
**Mar 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5967 S UNIVERSITY DR  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5967 S UNIVERSITY DR  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 59-3788727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRUCE, ABRAMSON  
5967 S UNIVERSITY DRIVE  
DAVIE, FL 33328 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: DPT  
Name: ABRAMSON, BRUCE M PRES  
Address: 5967 SOUTH UNIVERSITY DRIVE  
City-St-Zip: DAVIE, FL 33328

Title: VS  
Name: ABRAMSON, JUDY S  
Address: 5967 SOUTH UNIVERSITY DRIVE  
City-St-Zip: DAVIE, FL 33328

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: BRUCE M. ABRAMSON

PRES

03/10/2011

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

\_\_\_\_\_  
Date