

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011117

Entity Name: SHERIDAN DONUTS, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

8950 N KENDALL SRIVE STE 405W
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

8950 N KENDALL SRIVE STE 405W
MIAMI, FL 33176

New Mailing Address:

FEI Number: 32-0141207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLINS, LAURENCE E CPA
201 S.E. 15TH TERRACE STE 212
DEERFIELD BEACH, FL 33441 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: DP () Delete
Name: FERREIRA, JOSEPH J
Address: 601 LAKE BLVD
City-St-Zip: WESTON, FL 33326

Title: DT () Delete
Name: CUTLER, CHARLES I
Address: 3320 WASHINGTON LANE
City-St-Zip: COOPER CITY, FL 33026

Title: DS () Delete
Name: FERRIERA, MICHAEL J
Address: 4120 STAG HORN
City-St-Zip: WESTON, FL 33331

Title: DV () Delete
Name: CUTLER, EDWARD L
Address: 8950 NORTH KENDALL DRIVE STE 405W
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL J. FERREIRA

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04/22/2009

Electronic Signature of Signing Officer or Director

Date