

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000068299

Entity Name: COUNTRYSIDE DONUTS,INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

27001 US 19N
CLEARWATER, FL 33761 US

New Principal Place of Business:

27001 US 19 N
CLEARWATER, FL 33761 US

Current Mailing Address:

2551 GULF TO BAY BLVD
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 20-4864175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, VIKALP
2551 GULF TO BAY BOULEVARD
CLEARWATER, FL 33765 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: P D () Delete
Name: PATEL, VIKALP
Address: 2551 GULF TO BAY BOULEVARD
City-St-Zip: CLEARWATER, FL 33765 US

Title: VP D () Delete
Name: PATEL, SNEHA
Address: 32 KING GEORGE ROAD
City-St-Zip: WARREN, NJ 07059 US

Title: S D () Delete
Name: MEHTA, NIRAV
Address: 12 WINDING RIDGE WAY
City-St-Zip: WARREN, NJ 07059 US

Title: T D () Delete
Name: PATEL, RUPAL
Address: 12 WINDING RIDGE WAY
City-St-Zip: WARREN, NJ 07059 US

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: VIKALP PATEL

P D

04/25/2008

Electronic Signature of Signing Officer or Director

Date