

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000087785

**FILED**  
**Feb 19, 2011**  
**Secretary of State**

**Entity Name:** SENECA CIGARETTES OF FLORIDA INC.

**Current Principal Place of Business:**

14535 S. E. HWY 441  
UNIT #67  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

**Current Mailing Address:**

16726 SE 77TH NORTHRIDGE COURT  
THE VILLAGES, FL 32162

**New Mailing Address:**

**FEI Number:** 75-3218246

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LITTLETON, L.S.  
6821 CABALLERO COURT  
JACKSONVILLE, FL 32217 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:** P/D  
**Name:** JOHNSTON, MELVYN E  
**Address:** 16726 SE 77TH NORTHRIDGE COURT  
**City-St-Zip:** THE VILLAGES, FL 32162

**Title:** T  
**Name:** JOHNSTON, MELVYN E  
**Address:** 16726 SE 77TH NORTHRIDGE COURT  
**City-St-Zip:** THE VILLAGES, FL 32162

**Title:** VP/S  
**Name:** BROWNELL, SHIRLEY F  
**Address:** 16726 SE 77TH NORTHRIDGE COURT  
**City-St-Zip:** THE VILLAGES, FL 32162

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:** SHIRLEY F. BROWNELL

VP/S

02/19/2011

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

\_\_\_\_\_  
Date