2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024590

Current Mailing Address:

Entity Name: FLORIDAS DELIVERY COMPANY, SE

FILED Apr 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1713 PRIMROSE CT 2929 SE OCEAN BLVD PORT ST LUCIE, FL 34952 UNIT I-3

STUART, FL 34996

New Mailing Address:

516/11(1,12 5165

1713 PRIMROSE CT 2929 SE OCEAN BLVD PORT ST LUCIE, FL 34952 UNIT I-3 STUART, FL 34996

FEI Number: 20-8497568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORMELL, SHIRLEY A

1713 PRIMROSE CT

PORT ST LUCIE, FL 34952 US

ANSARA, NICHOLAS R

2929 SE OCEAN BLVD

UNIT I-3

STUART, FL 34996 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: NICHOLAS R ANSARA 04/26/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 CORMELL, SHIRLEY A
 Name:

 Address:
 1713 PRIMROSE CT
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34952
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name: ANSARA, NICHOLAS R
Address: 1713 PRIMROSE CT
ANSARA, NICHOLAS R
Address: 2929 SE OCEAN BLVD UNIT I-3

City-St-Zip: PORT ST LUCIE, FL 34952 City-St-Zip: STUART, FL 34996

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: SHIRLEY A CORMELL D 04/26/2009