# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 21, 2009**
**Secretary of State**

DOCUMENT# P07000038609

**Entity Name:** ANTHONY PERRI FARM INC.

**Current Principal Place of Business:**

3025 N.E. 106 TH ST.
ANTHONY, FL 32617

**New Principal Place of Business:**

3055 N.E. 106 TH ST.
ANTHONY, FL 32617

**Current Mailing Address:**

P.O. BOX 145
ANTHONY, FL 32617

**New Mailing Address:**

**FEI Number: 20-8726586** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PERRY, KEVIN S
3025 N.E. 106 TH ST.
ANTHONY, FL 32617 US

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

PERRY, KEVIN S
3055 N.E. 106 TH ST.
ANTHONY, FL 32617 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: KEVIN PERRY 01/21/2009
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: PERRY, KEVIN S
Address: P.O. BOX 145
City-St-Zip: ANTHONY, FL 32617

Title: S ( ) Delete
Name: PERRY, PATRICIA
Address: P.O. BOX 145
City-St-Zip: ANTHONY, FL 32617

Title: VP ( ) Delete
Name: PERRY, ANTHONY J JR.
Address: 2236 CHESTNUT AVE
City-St-Zip: RONKONKOMA, NY 11779

Title: T ( ) Delete
Name: PERRY, NANCY H
Address: 2236 CHESTNUT AVE
City-St-Zip: RONKONKOMA, NY 11779

**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: KEVIN PERRY P 01/21/2009
Electronic Signature of Signing Officer or Director Date