

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000008383

Entity Name: FOOD SHUTTLE, INC.

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

110 PORT SIDE VILLAS UNIT 204
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

110 PORT SIDE VILLAS UNIT 204
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 06-1834806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TICE, JAMES E
110 PORT SIDE VILLAS UNIT 204
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

TICE, JAMES E
16220 SW 280TH STREET
HOMESTEAD, FL 33031 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: JAMES E. TICE

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MUNIGAN, MICHAEL
Address: 110 PORT SIDE VILLAS UNIT 204
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: MC CANN, NATHANIAL
Address: 110 PORT SIDE VILLAS UNIT 204
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: MYATT, DYLIN
Address: 555 FILMORE, UNIT 404
City-St-Zip: CAPE CORAL, FL 32920RA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: CUNIGAN, MICHAEL
Address: 110 PORT SIDE VILLAS UNIT 204
City-St-Zip: CAPE CANAVERAL, FL 32920 US

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 CUNIGAN

PRES

01/06/2009

Electronic Signature of Signing Officer or Director

Date