

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068005

FILED
Apr 17, 2009
Secretary of State

Entity Name: APPLE JUICE INNOVATIONS, INC.

Current Principal Place of Business:

652 WINDING LAKE DR
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

652 WINDING LAKE DR
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 26-3008507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, OLIVIA
652 WINDING LAKE DR
CLERMONT, FL 34711 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 () Delete
Name: CHAPMAN, OLIVIA
Address: 652 WINDING LAKE DR
City-St-Zip: CLERMONT, FL 34711

Title: V () Delete
Name: CHAPMAN, PAUL
Address: 652 WINDING LAKE DR
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: WILLIAMSON, BRIAN
Address: 1837 SANDY CREEK LANE
City-St-Zip: ORLANDO, FL 32826

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:

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: OLIVIA CHAPMAN

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date