

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000084781

Entity Name: ISLAND STYLE BAKERY, INC.

FILED  
Feb 17, 2009  
Secretary of State

## Current Principal Place of Business:

1685 FORUM PLACE  
WEST PALM BEACH, FL 33401 US

## New Principal Place of Business:

## Current Mailing Address:

1685 FORUM PLACE  
WEST PALM BEACH, FL 33401 US

## New Mailing Address:

FEI Number: 80-0258380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RADCLIFFE, DESMOND  
1740 PIERSIDE CIRCLE  
WELLINGTON, FL 33414 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: RADCLIFFE, DESMOND  
Address: 1740 PIERSIDE CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

Title: VD ( ) Delete  
Name: NEITA, ANDREW  
Address: 10479 82ND LANE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP D (X) Change ( ) Addition  
Name: NELSON, GLORIA  
Address: 5815 EDDY COURT  
City-St-Zip: LAKE WORTH, FL 33463 US

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: DESMOND RADCLIFFE

P

02/17/2009

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

\_\_\_\_\_  
Date