2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096135

FILED Apr 16, 2009 Secretary of State

Entity Name: CASTLEBROOK CREAMERY, INC.	
Current Principal Place of Business:	New Principal Place of Business:
8815 THOMAS DRIVE	
PANAMA CITY BEACH, FL 32408	
Current Mailing Address:	New Mailing Address:
8815 THOMAS DRIVE	
PANAMA CITY BEACH, FL 32408	
FEI Number: 26-3603832 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
KITCHENS, ALAN 8815 THOMAS DRIVE	HARRISON, SYLVIA M SECY 8815 THOMAS DRIVE
A PANAMA CITY BEACH, FL 32408 US	A PANAMA CITY BEACH, FL 32408 US
The above named entity submits this statement for the purpose of in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: SYLVIA HARRISON	04/16/2009
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PS () Delete Name: KITCHENS, ALAN Address: 8815A THOMAS DRIVE City-St-Zip: PANAMA CITY BEACH, FL 32408	Title: PRES (X) Change () Addition Name: KITCHENS, ALAN Address: 8815A THOMAS DRIVE City-St-Zip: PANAMA CITY BEACH, FL 32408 US
Title: () Delete Name: Address: City-St-Zip:	Title: SEC () Change (X) Addition Name: HARRISON, SYLVIA M SEC/TRE Address: 8815 A THOMAS DRIVE City-St-Zip: PANAMA CITY, FL 32408 US
Title: () Delete Name: Address: City-St-Zip:	Title: VP () Change (X) Addition Name: KITCHENS, SHERRI VP Address: 8815A THOMAS DRIVE City-St-Zip: PANANA CITY, FL FLORIDA 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: SYLVIA HARRISON SECY 04/16/2009