

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000043955

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: LEE'S FOOD STORE OF SARASOTA, INC.

**Current Principal Place of Business:**

5604 SWIFT RD.  
SARASOTA, FL 34231 US

**New Principal Place of Business:**

**Current Mailing Address:**

6711 MAYBOLE PLACE  
TEMPLE TERRACE, FL 33617 US

**New Mailing Address:**

FEI Number: 59-3197924

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOLFSON, WILLIAM I  
6711 MAYBOLE PLACE  
TEMPLE TERRACE, FL 33617 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: D ( ) Delete  
Name: WOLFSON, WILLIAM I  
Address: 6711 MAYBOLE PLACE  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D ( ) Delete  
Name: WOLFSON, LEE A  
Address: 5732 ANTIETAM DR  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: WILLIAM WOLFSON

D

04/28/2008

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

\_\_\_\_\_  
Date