

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049572

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Entity Name:** COUNTRY PINE WHOLESale, INC.

**Current Principal Place of Business:**

COUNTRY PINE WHOLESale INC  
1240 E NEWPORT CENTER DR  
DEERFIELD, FL 33442 US

**New Principal Place of Business:**

**Current Mailing Address:**

COUNTRY PINE WHOLESale INC  
1240 E NEWPORT CENTER DR  
DEERFIELD, FL 33442 US

**New Mailing Address:**

**FEI Number:** 65-0423987      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MOLYNEUX, BERNARD  
1240 E NEWPORT CENTER DR  
DEERFIELD BCH., FL 33442 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MOLYNEUX, BERNARD  
Address: 1240 E. NEWPORT CENTER DRIVE  
City-St-Zip: DEERFIELD BEACH, FL 33442

I hereby 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 all other like empowered.

SIGNATURE: BERNARD MOLYNEUX

P

03/05/2012

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

\_\_\_\_\_ Date