## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000073573

Entity Name: THE WHITE APRON CATERING, INC.

FILED Jan 19, 2011 Secretary of State

| Current Principal Place of Business:                           |                                 | New Principal Place of Business:          |                                      |
|--|---------------------------------|---|--------------------------------------|
| 2201 NE 2 STREET<br>GAINESVILLE, FL 32609                      |                                 |   |                                      |
| Current Mailing Address:                                       |                                 | New Mailing Address:                      |                                      |
| 2201 NE 2 STREET<br>GAINESVILLE, FL 32609                      |                                 |   |                                      |
| FEI Number: 59-3214784   | FEI Number Applied For ( )      | FEI Number Not Applicable ( )             | Certificate of Status Desired ( )    |
| Name and Address of Current Registered Agent:                  |                                 | Name and Address of New Registered Agent: |                                      |
| GOLLNER, JULIA<br>3940 NW 25TH CIRCLE<br>GAINESVILLE, FL 32606 | US                              |   |                                      |
| The above named entity so<br>in the State of Florida.          | ubmits this statement for the p | ourpose of changing its registered        | office or registered agent, or both, |
| SIGNATURE:   |                                 |   |                                      |
| Flootroni  | Signature of Registered Age     | ent                                       | Date                                 |

## **OFFICERS AND DIRECTORS:**

Title: F

Name: GOLLNER, JULIA
Address: 3940 NW 25TH CIRCLE
City-St-Zip: GAINESVILLE, FL 32606

Title: V

Name: GOLLNER, PAUL
Address: 3940 NW 25TH CIRCLE
City-St-Zip: GAINESVILLE, FL 32606

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: JULIA GOLLNER PRES 01/19/2011