

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P94000061583

1. Entity Name
PENNANT FRUIT PRODUCTS, INC.



Principal Place of Business
**1200 MARTIN LUTHER KING JR BLVD
PLANT CITY, FL 33563**

Mailing Address
**P.O. DRAWER Y
PLANT CITY, FL 33564**



01042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3262649

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LASKOWITZ, JACK
1200 MARTIN LUTHER KING JR BLVD
PLANT CITY, FL 33563**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent's signature required when constituting)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000780548
01/14/08-80026-013 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC GORDON, MELVIN S 1200 MARTIN LUTHER KING JR BLVD PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GORDON, RANDY S 1200 MARTIN LUTHER KING JR BLVD PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SCHULIS, TRACY W 1200 W. DR. MLK JR. BLVD. PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GORDON, MARK H 1200 W. DR. MLK JR. BLVD. PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] **J. Laskowitz CFO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/08
Date

(813) 752-1155
Daytime Phone