

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000044394

FILED  
Apr 05, 2005  
Secretary of State

Entity Name: GOURMET CLASSIC SALADS, INC.

## Current Principal Place of Business:

240 BULLARD AVE.  
LAKE WALES, FL 33853 US

## New Principal Place of Business:

240 EAST BULLARD AVENUE  
LAKE WALES, FL 33853 US

## Current Mailing Address:

1550 N. CROOKED LAKE DR.  
BABSON PARK, FL 33827 US

## New Mailing Address:

240 EAST BULLARD AVENUE  
LAKE WALES, FL 33827 US

FEI Number: 59-3317961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BELLAMY, LEON D JR.  
240 BULLARD AVE.  
LAKE WALES, FL 33853 US

## Name and Address of New Registered Agent:

BELLAMY, LEON D JR.  
240 BULLARD AVENUE  
LAKE WALES, FL 33853 US

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:

04/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TORTORICI, JACQUELINE  
Address: 801 HOLLINGSWORTH PLACE  
City-St-Zip: LAKELAND, FL 33801

Title: PTST ( ) Delete  
Name: BELLAMY, LEON D JR.  
Address: 1550 N. CROOKED LAKE DR  
City-St-Zip: BABSON PARK, FL 33827

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: BELLAMY, JACQUELINE  
Address: 801 HOLLINGSWORTH PLACE  
City-St-Zip: LAKELAND, FL 33801

Title: CHR (X) Change ( ) Addition  
Name: BELLAMY, LEON D JR.  
Address: 1550 N. CROOKED LAKE DR  
City-St-Zip: BABSON PARK, FL 33827

Title: VPS ( ) Change (X) Addition  
Name: FRANCIS, GENE E MR  
Address: 3230 EMANUEL DRIVE  
City-St-Zip: LAKE WALES, FL 33898

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GENE FRANCIS

VPS

04/05/2005

Electronic Signature of Signing Officer or Director

Date