

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000046722

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: COUNTRY PINE CLASSICS, INC.

**Current Principal Place of Business:**

1892 TRADE CENTER WAY  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

1892 TRADE CENTER WAY  
NAPLES, FL 34109 US

**New Mailing Address:**

FEI Number: 65-0597425

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOLGAN, CUNEYT  
1892 TRADE CENTER WAY  
NAPLES, FL 34109 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: BOLGAN, CUNEYT  
Address: 1892 TRADE CENTER WAY  
City-St-Zip: NAPLES, FL 34109

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CUNEYT BOLGAN

D

01/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date