

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000071144

Entity Name: GULF SHORE PRODUCE, INC.

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

9215 THE LANE  
NAPLES, FL 34109

## New Principal Place of Business:

2744 EDISON AVE.  
UNIT 5  
FORT MYERS, FL 33916

## Current Mailing Address:

P.O. BOX 5040  
IMMOKALEE, FL 34143

## New Mailing Address:

P.O. BOX 2524  
FORT MYERS, FL 33902

FEI Number: 59-3404861

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHEPHERD, JAMES F  
9215 THE LANE  
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: PVST ( ) Delete  
Name: SHEPHERD, JAMES F  
Address: 9215 THE LANE  
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete  
Name: SHEPHERD, JAMES F  
Address: 9215 THE LANE  
City-St-Zip: NAPLES, FL 34109

Title: P ( ) Delete  
Name: SHEPHERD, JAMES F  
Address: 9215 THE LANE  
City-St-Zip: NAPLES, FL 34109

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JAMES F. SHEPHERD

PRES

03/24/2009

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

\_\_\_\_\_  
Date