2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000057246

Entity Name: SUPER FLEA FOOD SERVICES, INC.

FILED Feb 07, 2005 Secretary of State

Current Principal Place of Business:			New Princip	New Principal Place of Business:	
4121 NW 4 OCALA, FI		S			
Current Mailing Address:			New Mailing	New Mailing Address:	
P O BOX 3 OCALA, FI		S			
FEI Number:	: 59-3454497	FEI Number Applied For ()	FEI Number Not Applica	able () Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and A	ddress of New Registered Agent:	
OCALA, FI	44TH AVENUI L 34482 U	S	nurnose of changing its	registered office or registered agent, or both,	
	e of Florida.	Submits this statement for the	purpose or changing its	registered office of registered agent, of both,	
SIGNATUF	RE:				
	Electro	nic Signature of Registered Aç	gent	Date	
Election Car	npaign Financin	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	ST (GREENE, III C 11514 E. HWY FT MC COY, F	7 316	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (SEYLER, EDW 707 NE 25TH A OCALA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD (PAULEY, GAR 4121 NW 44TH OCALA, FL 34	H AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Name: C Address: 1	AST () Change (X) Addition GREENE, SUE 1514 E. HWY. 316 FORT MCCOY, FL 32134	
Title:	,) Delete	Title: A	AST () Change (X) Addition	

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: C. RAY GREENE, III DST 02/07/2005