

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000060990

FILED
Aug 28, 2008
Secretary of State

Entity Name: APPLESEED HEALTH FOOD CO.

Current Principal Place of Business:

1311 S. US 1
ROCKLEDGE, FL 32955

New Principal Place of Business:

1007 PATHFINDER WAY
UNIT 110
ROCKLEDGE, FL 32955

Current Mailing Address:

1311 S. US 1
ROCKLEDGE, FL 32955

New Mailing Address:

1007 PATHFINDER WAY
UNIT 110
ROCKLEDGE, FL 32955

FEI Number: 59-3460523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAAS, FELICIA R
2103 CLAIREMONT DR
COCOA, FL 32922 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: MAAS, FELICIA R
Address: 2103 CLAIREMONT DR.
City-St-Zip: COCOA, FL 32922

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 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: FELICIA RENE MAAS

PSD

08/28/2008

Electronic Signature of Signing Officer or Director

Date