

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000104648

1. Entity Name
GRANDMA YODER'S, INC.



Principal Place of Business
**5896 53RD AVE. EAST
BRADENTON, FL 34203**

Mailing Address
**5896 53RD AVE. EAST
BRADENTON, FL 34203**



01262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0807477

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NAUMAN, CONNIE
5164 MELDON CIR
SARASOTA, FL 34232**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NAUMAN, CONNIE
STREET ADDRESS	5164 MELDON CIRCLE
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	ST
NAME	WEBB, ROSE
STREET ADDRESS	9715 BRADEN RUN
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	D
NAME	BYLER, MARY
STREET ADDRESS	14725 MADISON RD.
CITY-ST-ZIP	MIDDLEFIELD, OH 44062
TITLE	D
NAME	GLENN, KAROLYN
STREET ADDRESS	2712 NANCY STREET
CITY-ST-ZIP	SARASOTA, FL 34237
TITLE	D
NAME	YODER, VERNA
STREET ADDRESS	2712 NANCY STREET
CITY-ST-ZIP	SARASOTA, FL 34237
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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03/07/05-80072-020 150.00

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Connie Nauman President

2/26/2005 941-739-2911