

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000072705

FILED
Apr 19, 2004
Secretary of State

Entity Name: GOURMET GOURMET, INC.

Current Principal Place of Business:

1408 LEWIS ST
AMELIA ISLAND
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

1408 LEWIS ST
AMELIA ISLAND
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 59-3533976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDER WEGE, LISA
1350 OLD BLUFF RD
FERNANDINA BEACH, FL 32034 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: P () Delete
Name: BATTEN, DAVID
Address: 1350 OLD BLUFF RD
City-St-Zip: AMELIA ISLAND, FL 32034

Title: CP () Delete
Name: VANDER WEGE, LISA
Address: 1350 OLD BLUFF RD
City-St-Zip: AMELIA ISLAND, FL 32034

Title: T () Delete
Name: VANDER-WEGE, TARAN
Address: 1350 OLD BLUFF RD
City-St-Zip: AMELIA ISLAND, FL 32034

Title: S () Delete
Name: ROOSTER, JOANNE
Address: 4628 A WHIMBREL LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VANDERWEGE, LISA
Address: 1350 OLD BLUFF RD
City-St-Zip: AMELIA ISLAND, FL 32034

Title: VP (X) Change () Addition
Name: VANDER WEGE, TARAN
Address: 1350 OLD BLUFF RD
City-St-Zip: AMELIA ISLAND, FL 32034

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

Title: S (X) Change () Addition
Name: PLOOSTER, JOANNE
Address: 4628 A WHIMBREL LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

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: LISA VANDERWEGE

P

04/19/2004

Electronic Signature of Signing Officer or Director

Date