## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000000241

Entity Name: ALLSTATE FOOD MARKETING, INC.

FILED Jul 09, 2004 Secretary of State

4494 JOHN YOUNG PARKWAY 4494 N JOHN YOUNG PARKWAY

ORLANDO, FL 32804 ORLANDO, FL 32804

**Current Mailing Address: New Mailing Address:** 

4494 JOHN YOUNG PARKWAY 4494 N JOHN YOUNG PARKWAY

ORLANDO, FL 32804 ORLANDO, FL 32804

FEI Number: 65-0887164 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

HAIRE, PAUL L HAIRE, PAUL L 4494 N JOHN YOUNG PARKWAY 4494 JOHN YOUNG PARKWAY ORLANDO, FL 32804 ORLANDO, FL 32804

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: 07/09/2004

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition

HAIRE, PAUL L HAIRE, PAUL L Name: Name:

4494 JOHN YOUNG PARKWAY 4494 N JOHN YOUNG PARKWAY Address: Address:

City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804

PD Title: (X) Change ( ) Addition Title: () Delete SHAVER, DONALD E Name: SHAVER, DONALD E

Name: Address:

4494 JOHN YOUNG PARKWAY 4494 N JOHN YOUNG PARKWAY Address:

ORLANDO, FL 32804 ORLANDO, FL 32804 City-St-Zip: City-St-Zip:

Title: ( ) Change (X) Addition Title: () Delete

MURPHY, DAVID A Name: Name:

4494 N JOHN YOUNG PARKWAY Address Address:

City-St-Zip: City-St-Zip: ORLANDO, FL 32804

Title: () Delete Title: ( ) Change (X) Addition

KRESS, WILLIAM Name: Name:

Address: Address: 4494 N JOHN YOUNG PARKWAY

City-St-Zip: City-St-Zip: ORLANDO, FL 32804

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.

Ρ SIGNATURE: DAVID MURPHY 07/09/2004