

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000109097

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: FOODCRAFTERS DISTRIBUTING COMPANY

## Current Principal Place of Business:

1350 SHEELER RD.  
APOPKA, FL 32703

## New Principal Place of Business:

## Current Mailing Address:

1350 SHEELER RD.  
APOPKA, FL 32703

## New Mailing Address:

FEI Number: 59-3619455

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOOD, PETER  
1350 SHEELER RD.  
APOPKA, FL 32703 US

## Name and Address of New Registered Agent:

WHITAKER, RICHARD  
1350 SHEELER RD.  
APOPKA, FL 32703 US

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: RICHARD WHITAKER

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROCHE, ROBERT  
Address: 1350 SHEELER RD  
City-St-Zip: APOPKA, FL 32703

Title: ST (X) Delete  
Name: WOOD, PETER  
Address: 1350 SHEELER RD  
City-St-Zip: APOPKA, FL 32703

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERT ROCHE

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date