2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S03829

Name:

Address: City-St-Zip: GARRATT, ROBERT F.

CAPE CORAL, FL

1709 S.W. 15TH AVENUE

FILED Apr 24, 2009 Secretary of State

				,	
Entity Nan	ne: GARR	ATT FOOD SERVICES, INC.			
Current Principal Place of Business:			New Principal Place	of Business:	
1709 SOUTHWEST 15TH AVENUE CAPE CORAL, FL 339913240					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1709 SOUTHWEST 15TH AVENUE CAPE CORAL, FL 339913240					
FEI Number:	65-0222181	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
GARRATT, ALBERT M. 1709 SOUTHWEST 15TH AVENUE CAPE CORAL, FL 33991 US				GARRATT, DAVID 1709 SOUTHWEST 15TH AVENUE CAPE CORAL, FL 33991 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: DAVID GARRATT				04/24/2009	
	Electi	onic Signature of Registered Age	ent	Date	
Election Carr	paign Financ	eing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D GARRATT, E 1709 S.W. 1 CAPE CORA	5TH AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GARRATT, [5TH AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D	() Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BARBARA GARRATT P 04/24/2009