

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S42512

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: BERKE-BLAKE FANCY FOODS, INC.

## Current Principal Place of Business:

150 NATIONAL PLACE  
SUITE 140  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

## Current Mailing Address:

150 NATIONAL PLACE  
SUITE 140  
LONGWOOD, FL 32750 US

## New Mailing Address:

FEI Number: 59-3061593      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TODD KOBRIN  
300 S ORANGE AVE  
STE 1000  
ORLANDO, FL 32801 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: RESNICK, ANN PRES  
Address: 1947 ELKHORN COURT  
City-St-Zip: LONGWOOD, FL 32750

Title: S ( ) Delete  
Name: HEISNER, V SEC  
Address: 1947 ELKHORN COURT  
City-St-Zip: LONGWOOD, FL 32750

Title: V ( ) Delete  
Name: ZAHN, MARNIE  
Address: 1947 ELKHORN CT  
City-St-Zip: LONGWOOD, FL 32750 US

Title: D ( ) Delete  
Name: STONE, STEPHEN M  
Address: 725 N MAGNOLIA AVE  
City-St-Zip: ORLANDO, FL 32803 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANN RESNICK

P

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date