2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008
Secretary of State

DOCUMENT# V14123

Entity Name: BULK-N-NATURAL FOODSTORE, INC.

Current Principal Place of Business:

3737 BAHIA VISTA STREET
SARASOTA, FL 34232

New Principal Place of Business:

3737 BAHIA VISTA STREET
UNIT 1
SARASOTA, FL 34232

Current Mailing Address:

3737 BAHIA VISTA STREET
SARASOTA, FL 34232

New Mailing Address:

3737 BAHIA VISTA STREET
UNIT 1
SARASOTA, FL 34232

FEI Number: 65-0316518 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRABER, DAVID L.
448 GOLDEN SANDS DRIVE
SARASOTA, FL 34232 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: D ( ) Delete
Name: GRABER, DAVID L.,
Address: 448 GOLDEN SANDS DR
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete
Name: GRABER, MIRIAM,
Address: 448 GOLDEN SANDS DR
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete
Name: KNEPP, LOVINA FERN,
Address: 1091 ANNIE LAURIE LN
City-St-Zip: SARASOTA, FL 34240

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:

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: DAVID L GRABER D 02/14/2008
Electronic Signature of Signing Officer or Director — Date