

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50008

**Entity Name:** AMERICA'S FOOD PARTNERSHIP, INC.

**FILED**  
**Feb 16, 2015**  
**Secretary of State**  
**CC1714038319**

**Current Principal Place of Business:**

1130 RESERVE WAY  
#104  
NAPLES, FL 34105

**Current Mailing Address:**

1130 RESERVE WAY  
#104  
NAPLES, FL 34105 US

**FEI Number: 65-0347070**

**Certificate of Status Desired: No**

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

HEWITT, BARBARA  
1130 RESERVE WAY  
#104  
NAPLES, FL 34105 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title P/D  
Name HEWITT, PETER  
Address 1130 RESERVE WAY #104  
City-State-Zip: NAPLES FL 34105

Title D  
Name HUSHON, JOHN  
Address 81 SEAGATE DRIVE, #1501  
City-State-Zip: NAPLES FL 34103

Title VP/D  
Name WOOD, PHILLIP  
Address 1265 CREEKSIDE PKWY, SUITE #400  
City-State-Zip: NAPLES FL 34108

Title D/ST  
Name HEWITT, BARBARA  
Address 1130 RESERVE WAY #104  
City-State-Zip: NAPLES FL 34105

Title D  
Name WEATHERFORD, CHARLES  
Address 3373 HILLCREST ROAD  
City-State-Zip: GENEVA IL 60134

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PETER HEWITT**

**PRESIDENT**

**02/16/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date