

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L44197

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** PACIFIC COLLIER FRESH COMPANY

**Current Principal Place of Business:**

925 NEW HARVEST RD  
IMMOKALEE, FL 34142 US

**New Principal Place of Business:**

**Current Mailing Address:**

925 NEW HARVEST RD  
IMMOKALEE, FL 34142 US

**New Mailing Address:**

**FEI Number:** 65-0191339

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOUKONEN, EVERETT D  
1320 N 15TH ST  
IMMOKALEE, FL 34142 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

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: SPROUL, KATHERINE  
Address: 925 NEW HARVEST RD  
City-St-Zip: IMMOKALEE, FL 34142

Title: T/D  
Name: ABELL, MICHAEL  
Address: 925 NEW HARVEST RD  
City-St-Zip: IMMOKALEE, FL 34142

Title: D  
Name: COLLIER, BARRON III  
Address: 2600 GOLDEN GATE PARKWAY  
City-St-Zip: NAPLES, FL 34105

Title: D  
Name: BOAZ, BRADLEY A  
Address: 2600 GOLDEN GATE PARKWAY  
City-St-Zip: NAPLES, FL 34105

Title: C/D  
Name: ESFORMES, JOSEPH  
Address: 925 NEW HARVEST ROAD  
City-St-Zip: IMMOKALEE, FL 34142

Title: S/D  
Name: HELLER, BILLY  
Address: 925 NEW HARVEST ROAD  
City-St-Zip: IMMOKALEE, FL 34142

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

SIGNATURE: MICHAEL ABELL

T/D

01/06/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date