

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701047

FILED  
Jan 16, 2006  
Secretary of State

**Entity Name:** FLORIDA FERTILIZER AND AGRICHEMICAL ASSOCIATION, INC.

**Current Principal Place of Business:**

58 4TH STREET., NW  
SUITE 200  
WINTER HAVEN, FL 33881 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 9326  
WINTER HAVEN, FL 338839326 US

**New Mailing Address:**

**FEI Number:** 59-0245380

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARTNEY, MARY C  
58 4TH STREET, NW  
STE 200  
WINTER HAVEN, FL 33881 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: D ( ) Delete  
Name: WEDGWORTH, DENNIS,  
Address: 651 N.W. 9TH STREET  
City-St-Zip: BELLE GLADE, FL

Title: D ( ) Delete  
Name: DAVIS, KEITH  
Address: WILL DUKE RD  
City-St-Zip: WACHULA, FL

Title: D ( ) Delete  
Name: HODGES, JOSEPH  
Address: 1180 SPRING CTR. S. BL. #102  
City-St-Zip: ALTAMONTE SPRINGS, FL

Title: P ( ) Delete  
Name: HARTNEY, MARY C  
Address: 58 4TH STREET, NW SUITE 200  
City-St-Zip: WINTER HAVEN, FL 33881 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CARSON, DAVID  
Address: P.O. BOX 486  
City-St-Zip: PLANT CITY, FL 33564

Title: D (X) Change ( ) Addition  
Name: DELANEY, DAVID  
Address: 110 ALLAMANDA COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D (X) Change ( ) Addition  
Name: SUTTON, BRENT  
Address: P.O. BOX 1407  
City-St-Zip: LAKE ALFRED, FL 33850

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY C. HARTNEY

P

01/16/2006

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

\_\_\_\_\_  
Date