2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005934

Entity Name: SANDUSKY FARMS CORPORATION NO. 1

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
P.O. BOX 171, 2830 CROSIADORE LANE TRAPPE, MD 21673	2830 CROSIADORE LANE TRAPPE, MD 21673 US
Current Mailing Address:	New Mailing Address:
P.O. BOX 171, 2830 CROSIADORE LANE TRAPPE, MD 21673	P.O. BOX 171, 2830 CROSIADORE LANE TRAPPE, MD 21673 US
FEI Number: 34-4346490 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
FEVER, ELLEN J 8787 BAY COLONY DRIVE, UNIT 501 NAPLES, FL 34108 US	FEUER, ELLEN J 8787 BAY COLONY DRIVE, UNIT 501 NAPLES, FL 34108 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: ELLEN J. FEUER	01/05/2009
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	

Title:

City-St-Zip:

OFFICERS AND DIRECTORS:

TRAPPE, MD 21673

() Delete

VCS

Title:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

FEUER, ELLEN J Name: Name: 8787 BAY COLONY DRIVE, UNIT 501 Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: () Delete Title: () Change () Addition KAUNTZ, EDMUND G Name: Name: Address: 3401 ENTERPRISE PARKWAY, SUITE 200 Address: BEACHWOOD, OH 44122 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition Name: AMBUS, STEVEN M Name: Address: POST OFFICE BOX 171 Address:

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: ELLEN J. FEUER VCS 01/05/2009