

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000049308

FILED  
May 01, 2004  
Secretary of State

Entity Name: FLORIDA ORGANIC FERTILIZER, INC.

**Current Principal Place of Business:**

1706 S. KINGS AVE.  
BRANDON, FL 335116216

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 888  
BRANDON, FL 335090888

**New Mailing Address:**

FEI Number: 59-3661968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOMPKINS, H. CHRISTOPHER II  
1706 S. KINGS AVE.  
BRANDON, FL 335116216

**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: VD ( ) Delete  
Name: TOMPKINS, H. CHRISTOPHER II  
Address: 1706 S. KINGS AVE.  
City-St-Zip: BRANDON, FL 335116216

Title: PD ( ) Delete  
Name: WISE, TONY  
Address: 998 WILLOWBROOK COURT  
City-St-Zip: WINTER HAVEN, FL 33884

Title: STD ( ) Delete  
Name: WISE, ALEXANDRA  
Address: 998 WILLOWBROOK COURT  
City-St-Zip: WINTER HAVEN, FL 33884

**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 for the exemption stated in Section 119.07(3)(i), 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: H CHRISTOPHER TOMPKINS II

D

05/01/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date