2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# 790825

Entity Name: SUGAR CANE GROWERS COOPERATIVE OF FLORIDA

Current Principal Place of Business:

C/O JUAN M. TELLECHEA
1500 WEST SUGARHOUSE ROAD
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

C/O JUAN M. TELLECHEA
1500 WEST SUGARHOUSE ROAD
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 59-0936222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARD, JEFFREY J
1500 WEST SUGARHOUSE ROAD
BELLE GLADE, FL 33430 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:	VP	( ) Delete
Name:	KRAMER, WILLIAM L	
Address:	1500 W. SUGARHOUSE RD.	
City-St-Zip:	BELLE GLADE, FL 33430	
Title:	PD	( ) Delete
Name:	WEDGWORTH, GEORGE H	
Address:	1500 W. SUGARHOUSE RD.	
City-St-Zip:	BELLE GLADE, FL 33430	
Title:	VSTD	( ) Delete
Name:	STEIN, FRITZ JR	
Address:	1500 W. SUGARHOUSE RD	
City-St-Zip:	BELLE GLADE, FL 33430	
Title:	VP	( ) Delete
Name:	TELLECHEA, JUAN M	
Address:	1500 W. SUGARHOUSE RD.	
City-St-Zip:	BELLE GLADE, FL 33430	

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

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

SIGNATURE: JUAN M. TELLECHEA VP 01/27/2009
Electronic Signature of Signing Officer or Director — Date