

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001605

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** SUNSHINE AGRICULTURE INCORPORATED

**Current Principal Place of Business:**

1801 HERMITAGE BLVD., SUITE 600  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

1801 HERMITAGE BLVD., SUITE 600  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 59-3375053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TODD, DAVID E  
1801 HERMITAGE BLVD.  
STE. 100  
TALLAHASSEE, FL 32308 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  
**Name:** BENNETT, DOUGLAS W  
**Address:** 1801 HERMITAGE BLVD., SUITE 600  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** DVAS  
**Name:** SMITH, JEFF  
**Address:** 1801 HERMITAGE BLVD., SUITE 600  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** DVAT  
**Name:** GRAY, LYNNE M  
**Address:** 1801 HERMITAGE BLVD., SUITE 600  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** VP  
**Name:** MARSH, PAUL  
**Address:** 801 WARRENVILLE STE 150  
**City-St-Zip:** LISLE, IL 60532

**Title:** T  
**Name:** CHRISTOPHER, JAY G  
**Address:** 801 WARRENVILLE RD STE 150  
**City-St-Zip:** LISLE, IL 60532

**Title:** P  
**Name:** ALLISON, CHARLES  
**Address:** 801 WARRENVILLE RD., STE. 600  
**City-St-Zip:** LISLE, IL 60532

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

**SIGNATURE:** CHRISTOPHER G. JAY

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01/07/2010

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

\_\_\_\_\_  
Date