## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 228148**

Entity Name: MIXON FRUIT FARMS INC

FILED Apr 03, 2006 Secretary of State

•			New Principal Place of Business:		
2712 26TH AVE E BRADENTON, FL 342087427 US					
Current Mailing Address:			New Mailing Address:		
2712 26TH AVE E BRADENTON, FL 342087427 US					
FEI Number: 59-0852150 FEI Number Applied For ( ) FEI Number		mber Not Appli	icable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MIXON, WM, D 2712 26TH AVE. EAST BRADENTON, FL 34208 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:					
Electronic Signature of Registered Agent Date  Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:		Delete	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition MIXON, WILLIAM P JR 2515 26TH AVE E BRADENTON, FL 34208	
Title: Name: Address: City-St-Zip:	STDM () D MIXON, WILLIAM 206 OAK AVE ANNA MARIA, FL		Title: Name: Address: City-St-Zip:	ST (X) Change ( ) Addition MIXON, WILLIAM DEAN, 206 OAK AVE POBOX 1729 ANNA MARIA, FL 34216	
Title: Name: Address: City-St-Zip:	VD () D MIXON, J.D., 6644 BUTLERS C BRADENTON, FL		Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition MIXON, JAMES D 2310 26TH AVE E BRADENTON, FL 34208	
Title: Name: Address: City-St-Zip:	D (X) E MIXON, M.E. 2515 26TH AVE E BRADENTON, FL		Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	D () D MIXON, K.L. 6644 BUTLERS C BRADENTON, FL		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MIXON, KATHERN L 2310 26TH AVE E BRADENTON, FL 34208	
Title: Name: Address: City-St-Zip:	D () C MIXON, J.S. 206 OAK AVE ANNA MARIA, FL	34216	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MIXON, JANET S 206 OAK AVE PO BOX 1729 ANNA MARIA, FL 34216	

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

SIGNATURE: WM D MIXON ST 04/03/2006