# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 29, 2007**
**Secretary of State**

DOCUMENT# 260468

**Entity Name:** HEARTLAND FERTILIZER COMPANY

**Current Principal Place of Business:**

917 11TH AVENUE WEST
P.O. BOX 877
PALMETTO, FL 342200877 US

**New Principal Place of Business:**

917 11TH AVENUE WEST
PALMETTO, FL 34221 US

**Current Mailing Address:**

917 11TH AVENUE WEST
P.O. BOX 877
PALMETTO, FL 342200877 US

**New Mailing Address:**

PO BOX 877
PALMETTO, FL 342200877 US

**FEI Number: 59-1021998** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GUTHRIE, GARY S
917 11TH AVE W
PALMETTO, FL 34221 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: GUTHRIE, GARY S.,
Address: 524 75TH ST
City-St-Zip: HOLMES BEACH, FL 34217

Title: D ( ) Delete
Name: LUCAS, APRIL M.,
Address: 1050 RIVERSIDE DR. A105
City-St-Zip: PALMETTO, FL 34221

Title: VD ( ) Delete
Name: LUCAS, EARLE R JR,
Address: 1050 RIVERSIDE DR A103
City-St-Zip: PALMETTO, FL 34221

Title: TSD ( ) Delete
Name: GUTHRIE, ALICE M.,
Address: 524 75TH ST
City-St-Zip: HOLMES BEACH, FL 34217

**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 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: GARY S GUTHRIE PD 01/29/2007
Electronic Signature of Signing Officer or Director Date