

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # 323456

1. Entity Name
KIBLER AGRICULTURAL CORPORATION



Principal Place of Business
**3715 KIBLER RANCH RD
MYAKKA CITY, FL 34251 US**

Mailing Address
**3715 KIBLER RANCH RD
MYAKKA CITY, FL 34251 US**



01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1237240

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KIBLER, THOMAS B.
7184 N SERENOA DR
SARASOTA, FL 34241**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KIBLER, T. B. 7184 N SERENOA DR SARASOTA, FL 34241
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C D KIBLER, D.B., III 2113 FAIRMONT AVE. LAKELAND, FL 33803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THOMPSON, JACQUELYN 1920 AUSTIN TERRACE WINTER HAVEN, FL 33884
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIBLER, DAVID, B. IV 8725 12TH AVENUE NW BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROSS, NANCY DEW 902 SUMMERFIELD DR LAKELAND, FL 33803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas B. Kibler

Jan. 9, 2008

Date

941-322-1214

Daytime Phone #