

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 428698

FILED
Jan 05, 2009
Secretary of State

Entity Name: HOWLAND FEED MILL INC

Current Principal Place of Business:

9282 97TH LANE
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

PO BOX 6
LIVE OAK, FL 32064 US

New Mailing Address:

FEI Number: 59-1480570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWLAND, PEGGY R
1309 PINE AVE
LIVE OAK, FL 32060 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: HOWLAND, JOHN D,
Address: 919 WHITE AVENUE
City-St-Zip: LIVE OAK, FL

Title: STD () Delete
Name: HOWLAND, PEGGY R,
Address: 1309 PINE AVENUE
City-St-Zip: LIVE OAK, FL

Title: VD () Delete
Name: HOWLAND, MARY ALICE
Address: 919 WHITE AVE
City-St-Zip: LIVE OAK, FL 32064

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:

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

SIGNATURE: JOHN D. HOWLAND

PD

01/05/2009

Electronic Signature of Signing Officer or Director

Date