

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 439507

**FILED**  
**Mar 01, 2012**  
**Secretary of State**

**Entity Name:** GLADES CROP CARE, INC.

**Current Principal Place of Business:**

560 CENTER STREET  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

949 TURNER QUAY  
JUPITER, FL 33458

**New Mailing Address:**

**FEI Number:** 59-1492434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELLINGER, MADELINE E PRES  
949 TURNER QUAY  
JUPITER, FL 33458 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: PD  
Name: MELLINGER, MADELINE E.  
Address: 949 TURNER QUAY  
City-St-Zip: JUPITER, FL 33458 US

Title: ST  
Name: MELLINGER, H. CHARLES  
Address: 949 TURNER QUAY  
City-St-Zip: JUPITER, FL 33458 US

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

SIGNATURE: MADELINE MELLINGER

PD

03/01/2012

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

\_\_\_\_\_  
Date