2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 457005

FILED Feb 16, 2009 Secretary of State

Entity Name: GROCO AGRICULTURAL SERVICES, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
30620 PAS SAN ANTO	SCO RD DNIO, FL 33570	6 US			
Current M	lailing Addres	s:	New Mailing Address	s:	
P O BOX 6 SAN ANTO	668 DNIO, FL 33570	6 US			
FEI Number	: 59-1563709	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
GROSSEN 30620 PAS	NBACHER, EMI	ILE			
SAN ANTO	ONIO, FL 33570		purpose of changing its registered	d office or registered agent, or both,	
SAN ANTO	ONIO, FL 33570 named entity set of Florida.		purpose of changing its registered	d office or registered agent, or both,	
SAN ANTO The above in the State	ONIO, FL 33570 named entity se of Florida. RE:			d office or registered agent, or both, Date	
SAN ANTO The above in the State SIGNATUI	onnio, FL 33570 named entity set of Florida. RE: Electroni	submits this statement for the p			
SAN ANTO The above in the State SIGNATUI Election Car	onnio, FL 33570 named entity set of Florida. RE: Electroni	submits this statement for the particle of Registered Agranters of Registered Agrants Fund Contribution ().	ent		
SAN ANTO The above in the State SIGNATUI Election Car	named entity see of Florida. RE: Electronicanpaign Financing	submits this statement for the partic Signature of Registered Agoratuse Fund Contribution (). FORS: Delete HER, EMILE	ent	Date	

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: EMILE GROSSENBACHER PD 02/16/2009