

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832050

**FILED
Jan 14, 2009
Secretary of State**

Entity Name: DOLLAR FARM PRODUCTS CO., INC.

Current Principal Place of Business:

P. O. BOX 68
1001 DOTHAN ROAD
BAINBRIDGE, GA 39818 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 68
1001 DOTHAN ROAD
BAINBRIDGE, GA 39818 US

New Mailing Address:

FEI Number: 58-0862224 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KANE, ROBERT B.
325 JOHN KNOX ROAD, 100-E
TALLAHASSEE, FL 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: P () Delete
Name: DOLLAR, THOMAS II,
Address: PO BOX 68 1001 DOTHAN RD
City-St-Zip: BAINBRIDGE, GA 39818

Title: VP () Delete
Name: COHEN, ROBERT M,
Address: PO BOX 632., 222 CLIFTON ST.
City-St-Zip: BRINSON, GA 39825

Title: ST () Delete
Name: HADAR, TAMARA D
Address: 136 HORSESHOE RD
City-St-Zip: BAINBRIDGE, GA 39817

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: ROBERT M COHEN

VP

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date