

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # F02000006161 1. Entity Name AGRICHEM, INC.					
Principal Place of Business 8111 BLAIE CT., STE. C SARASOTA FL 34240			Mailing Address 8111 BLAIE CT., STE. C SARASOTA FL 34240		
2. Principal Place of Business Suite, Apt #, etc. City & State Zip Country		3. Mailing Address Suite, Apt #, etc. City & State Zip Country		 1st MOORE CR2E034 (10/04)	
4. FEI Number 11-2334285				☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KEHLENBECK, ANGELA C/O AGRICHEM, INC. 8111 BLAIE CT., STE. C SARASOTA FL 34240			7. Name and Address of New Registered Agent Name Street Address (P O Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P ☐ Delete SCHAMBERGER, PHILIP F JR. 20103 69TH AVE E BRADENTON FL 34211		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition 000000203302 01/29/05-80024-025 150.00	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Philip F. Schamberger Jr.</i>			PHILIP F. SCHAMBERGER JR. 1/27/2005 941 379 6002		