



# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # F03000003516</b> 1. Entity Name <b>MCNICHCRAM FEED &amp; SEED, INC.</b>	
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Principal Place of Business <b>756 HIGHWAY 292 VIDALIA, GA 30474</b>	Mailing Address <b>P.O. BOX 548 VIDALIA, GA 30475 US</b>
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**DO NOT WRITE IN THIS SPACE**

	
01042008 No Chg-P	CR2E034 (11/05)
4. FEI Number <b>58-2171222</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>CRAMER, ROBERT A 14493 225TH ROAD LIVE OAK, FL 32060</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC MCDONALD, FRANK L 402 MAIN STREET NE VIDALIA, GA 30474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD NICHOLSON, LEONARD 756 HIGHWAY 292 VIDALIA, GA 30474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC CRAMER, ROBERT A 14493 22TH ROAD LIVE OAK, FL 32060
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

<b>SIGNATURE:</b> 	<b>4/14/08</b>	<b>386-752-3955</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>