

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005727

FILED
Jan 10, 2006
Secretary of State

Entity Name: ADAMS BROTHERS PRODUCE COMPANY, INC.

Current Principal Place of Business:

302 FINELY AVENUE WEST
BIRMINGHAM, AL 35204

New Principal Place of Business:

302 FINLEY AVENUE WEST
BIRMINGHAM, AL 35204

Current Mailing Address:

P.O. BOX 2682
BIRMINGHAM, AL 35202

New Mailing Address:

FEI Number: 63-0411650 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PTD () Delete
Name: ADAMS, CARL III
Address: P.O. BOX 2682
City-St-Zip: BIRMINGHAM, AL 35202

Title: VD () Delete
Name: MCCRAY, J. SCOT
Address: P.O. BOX 2682
City-St-Zip: BIRMINGHAM, AL 35202

Title: SD () Delete
Name: MCCRAY, JOHN R
Address: P.O. BOX 2682
City-St-Zip: BIRMINGHAM, AL 35202

Title: CFO () Delete
Name: GRINSTEAD, SCOTT
Address: P.O. BOX 2682
City-St-Zip: BIRMINGHAM, AL 35202

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN R. MCCRAY

VD

01/10/2006

Electronic Signature of Signing Officer or Director

Date