

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F40254

FILED  
Apr 14, 2006  
Secretary of State

Entity Name: C & J FEED STORE, INC.

**Current Principal Place of Business:**

2653 AURORA  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

**Current Mailing Address:**

2653 AURORA RD  
MELBOURNE, FL 32935 US

**New Mailing Address:**

FEI Number: 59-2114712      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOYCE, PATRICK  
3611 TURTLEMOUND RD.  
MELBOURNE, FL 32935 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: VP ( ) Delete  
Name: JOYCE, DANNY P,  
Address: 3611 TURTLEMOUND RD  
City-St-Zip: MELBOURNE, FL

Title: PST ( ) Delete  
Name: JOYCE, PATRICK W  
Address: 3611 TURTLEMOND ROAD  
City-St-Zip: MELBOURNE, FL 32934

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: PATRICK JOYCE

PST

04/14/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date