


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # F79320
 1. Entity Name
 G.R. SUGARCANE FARM, INC.



Principal Place of Business Mailing Address
 ONE NORTH CLEMATIS ST.
 SUITE 200
 WEST PALM BEACH, FL 33401 ONE NORTH CLEMATIS ST.
 SUITE 200
 WEST PALM BEACH, FL 33401



DO NOT WRITE IN THIS SPACE

02082005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2201757	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CARSON, DONALD W
 ONE NORTH CLEMATIS ST.
 SUITE 200
 WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST CARSON, DONALD W ONE NORTH CLEMATIS ST., STE 200 WEST PALM BEACH, FL 33401
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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: Donald W. Carson Donald W. Carson, President 2/24/05 561-655-63
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #