


<h1 style="margin: 0;">DOCUMENT # F96000000754</h1>		
<b>1. Entity Name</b> BIOMASS PROCESSING TECHNOLOGY, INC.		
<b>Principal Place of Business</b> 3222 COMMERCE PL STE A WEST PALM BEACH, FL 33407		<b>Mailing Address</b> 3222 COMMERCE PL STE A WEST PALM BEACH, FL 33407 US
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip Country
<b>6. Name and Address of Current Registered Agent</b>		
DENNEY, LARRY W 12871 COMPTON RD LOXAHATCHEE, FL 33470		Name
		Street Address
		City
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registering the obligations of registered agent.</b>		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>		
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing:</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5 Ad</b>
<b>10. OFFICERS AND DIRECTORS</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	PCD DENNEY, LARRY W 12871 COMPTON ROAD LOXAHATCHEE, FL <input type="checkbox"/> Delete	<b>11.</b>
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	VSD SIMPSON, JACK B 7139 CRYSTAL LAKE DR WEST PALM BEACH, FL 33411 <input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	S DENNEY, PEGGY J 12871 COMPTON RD LOXAHATCHEE, FL 33470 <input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	V SCHROEDER, RICHARD M 4249 NW 56TH WAY GAINESVILLE, FL 32606 <input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in S indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60 changed, or on an attachment with an address, with all other like empowered.</b>		
<b>SIGNATURE:</b> <i>Larry W Denney, Peggy J Denney</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		