

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G55091

FILED
Jan 16, 2007
Secretary of State

Entity Name: COASTAL FERTILIZER & SUPPLY, INC.

Current Principal Place of Business:

209 ADAMS AVENUE EAST
IMMOKALEE, FL 34142 US

New Principal Place of Business:

Current Mailing Address:

209 ADAMS AVENUE EAST
IMMOKALEE, FL 34142 US

New Mailing Address:

FEI Number: 59-2322290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKER, TOMMY H.
2630 BOLERO DRIVE, #201
NAPLES, FL 34109 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: DP () Delete
Name: PARKER, TOMMY H.
Address: 2630 BOLERO DRIVE, #201
City-St-Zip: NAPLES, FL 34109

Title: V () Delete
Name: PARKER, LAINA
Address: 2334 NAPLES TRACE CIR #6
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: FRISBIE, MARK B
Address: 6451 MORGUN LAFAEE LN.
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: PARKER, LAINA
Address: 11690 IMPERIAL PINES WAY
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S (X) Change () Addition
Name: PARKER, KYLE
Address: 2334 NAPLES TRACE CIRCLE #6
City-St-Zip: NAPLES, FL 34109

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: LAINA PARKER

VP

01/16/2007

Electronic Signature of Signing Officer or Director

Date