

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G86192

FILED
Apr 18, 2011
Secretary of State

Entity Name: TRANSPLANT GROWERS INCORPORATED

Current Principal Place of Business:

30050 CR 437
SORRENTO, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1085
SORRENTO, FL 32776 US

New Mailing Address:

FEI Number: 59-2421093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEOD, RAYMOND A.
48 E. MAIN STREET
APOPKA, FL 32703 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

OFFICERS AND DIRECTORS:

Title: PST
Name: CHARLTON, GARY D.
Address: 1236 LAVANHAM CT
City-St-Zip: APOPKA, FL

Title: VCM
Name: CHARLTON, GARY D.
Address: 1236 LAVANHAM CT
City-St-Zip: APOPKA, FL

Title: D
Name: CHARLTON, GARY D.
Address: 1236 LAVANHAM CT
City-St-Zip: APOPKA, FL

I hereby 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 all other like empowered.

SIGNATURE: GARY D CHARLTON

PRES

04/18/2011

Electronic Signature of Signing Officer or Director

Date