

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H08287

FILED
Mar 29, 2007
Secretary of State

Entity Name: STATE LINE FARMS INCORPORATED

Current Principal Place of Business:

701 E. KING STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

701 E. KING STREET
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-2432518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPP, WILLIAM H
701 E. KING STREET
QUINCY, FL 32351 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: PSD () Delete
Name: SAPP, WILLIAM H
Address: 701 E. KING STREET
City-St-Zip: QUINCY, FL 32351

Title: VD () Delete
Name: SAPP, ANDREW D II
Address: 701 E KING STREET
City-St-Zip: QUINCY, FL 32351

Title: VD () Delete
Name: SAPP, WILLIAM H JR
Address: 1875 WINDEMERE DR
City-St-Zip: ATLANTA, GA 30324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: SAPP, ANDREW D II
Address: 134 CAMELLIA DRIVE
City-St-Zip: QUINCY, FL 32351

Title: VD (X) Change () Addition
Name: SAPP, WILLIAM H JR
Address: 1400 WESSYNGTON ROAD NE
City-St-Zip: ATLANTA, GA 30306

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: WILLIAM H. SAPP

PRES

03/29/2007

Electronic Signature of Signing Officer or Director

Date