2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H48936

Entity Name: BLACK GOLD COMPOST COMPANY

FILED Jan 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9115 N SILVER LAKE DRIVE 11424 CR 237

LEESBURG, FL 34788 OXFORD, FL 34484

Current Mailing Address: New Mailing Address:

PO BOX 190 OXFORD, FL 34484

FEI Number: 59-2505026 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANGE, R. MICHAEL

1750 BUENA VISTA DR

EUSTIS, FL 32726 US

LANGE, ROBERT M MR

1750 BUENA VISTA DR

EUSTIS, FL 32726 US

EUSTIS, FL 32726 US

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: ROBERT MICHAEL LANGE 01/23/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: VPD (X) Change () Addition Name: LANGE, ROBERT V Name: LANGE, ROBERT V MR

Address: 9115 N. SILVER LAKE DR. Address: 9115 N. SILVER LAKE DR. City-St-Zip: LEESBURG, FL 34788

Title: STVD () Delete Title: PSTD (X) Change () Addition
Name: LANGE R MICHAEL Name: LANGE ROBERT M MR

 Name:
 LANGE, R. MICHAEL
 Name:
 LANGE, ROBERT M MR

 Address:
 1750 BUENA VISTA DR.
 Address:
 1750 BUENA VISTA DR.

 City-St-Zip:
 EUSTIS, FL
 City-St-Zip:
 EUSTIS, FL 32726

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 MIZELL, WALKER D MR

 Address:
 Address:
 45120 DORMAN PLACE

 City-St-Zip:
 City-St-Zip:
 CALLAHAN, FL 32011

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 STAKE, LOREN MR

 Address:
 Address:
 4474 TWINVIEW LANE

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32814

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: ROBERT MICHAEL LANGE P 01/23/2006