

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J36597

Entity Name: INTERCHANGE FARMS, INC.

FILED  
Jul 05, 2005  
Secretary of State

## Current Principal Place of Business:

% MICHAEL D. COUNCIL  
405 9TH ST, PO BOX 1218  
RUSKIN, FL 33570

## Current Mailing Address:

4971 BACOPA LANE 8, #801C  
SAINT PETERSBURG, FL 33715

## New Principal Place of Business:

% MICHAEL D. COUNCIL  
1187 SKYE LANE  
PALM HARBOR, FL 34683

## New Mailing Address:

1187 SKYE LANE  
PALM HARBOR, FL 34683

FEI Number: 59-2740281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COUNCIL, MICHAEL D.  
4971 BACOPA LANE 8, #801C  
SAINT PETERSBURG, FL 33715 US

## Name and Address of New Registered Agent:

COUNCIL, MICHAEL D.  
1187 SKYE LANE  
PALM HARBOR, FL 34683 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: MICHAEL, COUNCIL D.

07/05/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SPENCER, WILLIAM H.,  
Address: 1910 14TH AVE. SE  
City-St-Zip: RUSKIN, FL 33570

Title: D ( ) Delete  
Name: COUNCIL, MICHAEL D.,  
Address: 5715 BRIGMAN AVENUE  
City-St-Zip: WIMAUMA, FL

Title: D ( ) Delete  
Name: CURRIE, W.E., III,  
Address: 5815 N. DALE MABRY HWY  
City-St-Zip: TAMPA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: COUNCIL, MICHAEL D.

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07/05/2005

Electronic Signature of Signing Officer or Director

Date