

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J58395

FILED
Jan 09, 2009
Secretary of State

Entity Name: SOUTH FLORIDA GROWERS ASSOCIATION, INC.

Current Principal Place of Business:

624 SW 93RD ST.
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

C/O GREENBERG & COMPANY
10830 SW 113TH PLACE
MIAMI, FL 33176 US

New Mailing Address:

C/O GREENBERG & COMPANY
10840 SW 113TH PLACE
MIAMI, FL 33176 US

FEI Number: 59-0698535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, JOHN M
LYNN & HANSON PA
48 NE 15 ST SECOND FL
HOMESTEAD, FL 33030 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: PD () Delete
Name: BRADFORD, SUSAN
Address: 624 SW 93RD ST.
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: IMMER, JOHN
Address: 1401 BRICKELL AVENUE, STE#825
City-St-Zip: MIAMI, FL 33131 US

Title: STD (X) Delete
Name: GILMORE, MARTHA
Address: 207 MIDDLE BAY RD.
City-St-Zip: BRUNSWICK, MA 04011 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: GILMORE, MARTHA
Address: 207 MIDDLE BAY RD
City-St-Zip: BRUNSWICK, MA 04011 US

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

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN BRADFORD

PD

01/09/2009

Electronic Signature of Signing Officer or Director

Date