

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K49185

FILED
Apr 29, 2004
Secretary of State

Entity Name: APRILE FARMS, INC.

Current Principal Place of Business:

7810 HIDDEN ISLAND LN
TEMPLE TERRACE, FL 33617

New Principal Place of Business:

Current Mailing Address:

7810 HIDDEN ISLAND LN
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: 59-2925655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APRILE, DANIEL T.
7810 HIDDEN ISLAND LN
TEMPLE TERRACE, FL 33617

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: DP () Delete
Name: APRILE, JOSEPH V.,
Address: 1112 W. RIVER DR.
City-St-Zip: TEMPLE TERRACE, FL

Title: DV () Delete
Name: APRILE, DANIEL T.,
Address: 7810 HIDDEN ISLAND LN
City-St-Zip: TEMPLE TERRACE, FL

Title: DTS () Delete
Name: APRILE, RONALD D.,
Address: 9225 KINDSRIDGE DR.
City-St-Zip: TEMPLE TERRACE, 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: DANIEL T. APRILE

DV

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date