

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K57179

Entity Name: H.D. BUDD FARMS, INC.

FILED
Apr 07, 2004
Secretary of State

Current Principal Place of Business:

% HEYWARD D. BUDD
3701 E. TRAPNELL RD
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

% HEYWARD D. BUDD
3701 E. TRAPNELL RD
PLANT CITY, FL 33567

New Mailing Address:

FEI Number: 59-2925105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUDD, HEYWARD D.
3701 E. TRAPNELL RD
PLANT CITY, FL 33566

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: BUDD, HEYWARD D.,
Address: 3701 E. TRAPNELL RD
City-St-Zip: PLANT CITY, FL

Title: DV () Delete
Name: BUDD, HENRY L.,
Address: 3107 S. TURKEY CREEK RD
City-St-Zip: PLANT CITY, FL

Title: DV () Delete
Name: ROGERS, JAMES M.,
Address: 2008 E. KEYSVILLE RD
City-St-Zip: LITHIA, FL

Title: ST () Delete
Name: BUDD, TERESA R.,
Address: 5702 TREE STAND LN
City-St-Zip: LAKELAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BUDD, HEYWARD D.,
Address: 3701 E. TRAPNELL RD
City-St-Zip: PLANT CITY, FL 33566

Title: DV (X) Change () Addition
Name: BUDD, HENRY L.,
Address: 4710 BUDD FARMS LANE
City-St-Zip: PLANT CITY, FL 33566

Title: DV (X) Change () Addition
Name: ROGERS, JAMES M.,
Address: 2701 ROGERS RANCH RD.
City-St-Zip: LITHIA, FL 33547

Title: ST (X) Change () Addition
Name: BUDD, TERESA R.,
Address: 5702 TREE STAND LN
City-St-Zip: LAKELAND, FL 33811

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: TERESA R. BUDD

ST

04/07/2004

Electronic Signature of Signing Officer or Director

_____ Date