

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K71300

Entity Name: AGRESSCO, INC.

FILED
Jul 16, 2007
Secretary of State

Current Principal Place of Business:

C/O G. DAVID MURRAH
BOX 1957
LABELLE, FL 33935

New Principal Place of Business:

Current Mailing Address:

C/O G. DAVID MURRAH
BOX 1957
LABELLE, FL 33935

New Mailing Address:

FEI Number: 65-0121671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURRAH, G. DAVID
212 JEROME AVENUE
IMMOKALLEE, FL 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: PST () Delete
Name: MURRAH, G. DAVID,
Address: 700 FORT THOMPSON
City-St-Zip: LABELLE, FL

Title: D () Delete
Name: MURRAH, G. DAVID,
Address: 700 FORT THOMPSON
City-St-Zip: LABELLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: G. DAVID MURRAH

PST

07/16/2007

Electronic Signature of Signing Officer or Director

Date