2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# L79664

Entity Name: HIGHLAND FARMS OF POLK COUNTY, INC.

Current Principal Place of Business:

4848 LK HANCOCK RD
HIGHLAND, FL 33846 US

New Principal Place of Business:

4848 LK HANCOCK RD
HIGHLAND CITY, FL 33846 US

Current Mailing Address:

P O BOX 607
HIGHLAND CITY, FL 33846 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROGERS, TOM
4740 LK HANCOCK ROAD
HIGHLAND CITY, FL 33846 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: D ( ) Delete
Name: ROGERS, TOM,
Address: 4740 LK HANCOCK RD
City-St-Zip: HIGHLANDS CITY, FL

Title: D ( ) Delete
Name: ROGERS, HOLLY
Address: 4740 LK HANCOCK RD.
City-St-Zip: HIGHLAND CITY, 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 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: TOM ROGERS D 01/03/2007
Electronic Signature of Signing Officer or Director Date