

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2004 08:00 AM

Secretary of State
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DOCUMENT #M76698

1. Entity Name
SOUTHERN FARM SUPPLY, INC.



Principal Place of Business
**906 U.S. HWY. 301 NORTH
P.O. BOX 398
PALMETTO, FL 34221 US**

Mailing Address
**906 U.S. HWY. 301 NORTH
P.O. BOX 398
PALMETTO, FL 34221 US**



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0068995

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HARRISON, THOMAS W.
1201-6TH AVE. W.
4TH FLOOR
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
SPENCER IV, ROBERT N
4820 RIVERVIEW BLVD.
BRADENTON, FL 34209**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
HARRISON, THOMAS W
1201 6TH AVE. W.
BRADENTON, FL 34205**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
TAYLOR, R. JAY
1724 17TH ST. W.
PALMETTO, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
MONETTE, WM. M
932 5TH AVENUE W.
PALMETTO, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MVS
COFFMAN, GARY L
12625 C.R. 675
PARRISH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
HUME, THOMAS H JR.
906 HWY. 301 E.
PALMETTO, FL**

000000002388
01/13/04-80011-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/8/04 (941) 722-3281

2004 for Profit Corporation
Annual Report

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Document #M76698
Southern Farm Supply, Inc.
906 U.S. Hwy. 301 North
P.O.Box 398
Palmetto, FL 34221

FEI: 65-0068995

Additional Officers and Directors for Section 10 (not enough room on
original form)

Addition

Title:	DT
Name:	Harllee Jr., Peter S.
Street Address:	1803.21 st St. West
City, State, Zip:	Palmetto, FL 34221