

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M78310

FILED
Apr 22, 2008
Secretary of State

Entity Name: AGRO CORPORATION

Current Principal Place of Business:

1031 SOUTH CALDWELL ST
SUITE 101
CHARLOTTLE, NC 28203 US

Current Mailing Address:

1031 SOUTH CALDWELL ST
SUITE 101
CHARLOTTLE, NC 28203 US

New Principal Place of Business:

1307 W. MOREHEAD STREET
SUITE 208
CHARLOTTLE, NC 28208 US

New Mailing Address:

1307 W. MOREHEAD STREET
SUITE 208
CHARLOTTLE, NC 28208 US

FEI Number: 56-1612678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKOKOS, PETER Z
1819 MAIN STREET
SUITE 610
SARASOTA, FL 34236 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: P () Delete
Name: HAMMONS, THOMAS L.,
Address: 1031 SOUTH CALDWELL ST., SUITE 101
City-St-Zip: CHARLOTTLE, NC 28203 US

Title: VP () Delete
Name: HAMMONS, NICOLE C.
Address: 1031 SOUTH CALDWELL ST., SUITE 101
City-St-Zip: CHARLOTTLE, NC 28203 US

Title: ST () Delete
Name: BOGDOWITZ, MATTHEW
Address: 1031 SOUTH CALDWELL ST., SUITE 101
City-St-Zip: CHARLOTTLE, NC 28203 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAMMONS, THOMAS L.,
Address: 1307 W. MOREHEAD STREET, SUITE 208
City-St-Zip: CHARLOTTLE, NC 28208 US

Title: VP (X) Change () Addition
Name: HAMMONS, NICOLE C.
Address: 1307 W. MOREHEAD STREET, SUITE 208
City-St-Zip: CHARLOTTLE, NC 28208 US

Title: ST (X) Change () Addition
Name: BOGDOWITZ, MATTHEW
Address: 1307 W. MOREHEAD STREET, SUITE 208
City-St-Zip: CHARLOTTLE, NC 28208 US

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: REBECCA L. FLEENOR

ACTG

04/22/2008

Electronic Signature of Signing Officer or Director

Date