2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2004
Secretary of State

DOCUMENT# M88841

Entity Name: AGRIPOST DADE COUNTY, INC.

Current Principal Place of Business:

1714 HOBAN RD. NW
WASHINGTON, DC 20007 US

New Principal Place of Business:

Current Mailing Address:

1714 HOBAN RD. NW
#300
WASHINGTON, DC 20007 US

New Mailing Address:

1714 HOBAN RD. NW
WASHINGTON, DC 20007 US

FEI Number: 65-0070336 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEST, E C
5651 NW 24TH TERR
BOCA RATON, FL 33496 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: PSD ( ) Delete
Name: FORRER, JOHN O
Address: 1714 HOBAN RD. NW
City-St-Zip: WASHINGTON, DC 20007

Title: D ( ) Delete
Name: WEST, EDWARD C.,
Address: 5651 NW 24TH TERRACE
City-St-Zip: BOCA RATON, FL 33496

Title: D ( ) Delete
Name: KELLER, FREDERICK F JR
Address: 11 5THA VE
City-St-Zip: NY, NY 12000

Title: D ( ) Delete
Name: COOKSEY, NEIL
Address: 6135 PARKSOUTH DRIVE
City-St-Zip: CHARLOTTE, NC 28210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: JOHN O. FORRER PRES 04/10/2004

Electronic Signature of Signing Officer or Director Date