

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90024 002 ****70.00

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1. Entity Name

I CAN GROW, INC.



Principal Place of Business

2035 PALMVIEW RD.
COTTONDALE FL 32431

Mailing Address

2035 PALMVIEW RD.
COTTONDALE FL 32431

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-3749335

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUTZEL, CHRISTOPHER J
2035 PALMVIEW RD.
COTTONDALE FL 32431

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME HUTZEL, GLENDA M EXEC.
STREET ADDRESS 2035 PALMVIEW RD.
CITY-ST-ZIP COTTONDALE FL 32431

TITLE ☒ Delete
NAME HUTZEL, CHRISTOPHER J
STREET ADDRESS 2035 PALMVIEW RD.
CITY-ST-ZIP COTTONDALE FL 32431

TITLE ☐ Delete
NAME HOUGHLAND, PATTY
STREET ADDRESS 7020 N. BLUE ANGEL PKWY
CITY-ST-ZIP PENSACOLA FL 32526

TITLE ☐ Delete
NAME SYLVESTER, RUBY
STREET ADDRESS 4324 FOREHAND LANE
CITY-ST-ZIP MARIANNA FL 32448

TITLE ☐ Delete
NAME NELSON, CHERYL E
STREET ADDRESS 4374 WILTON STREET
CITY-ST-ZIP MARIANNA FL 32446

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Bietenholz, Virginia
CITY-ST-ZIP 11651 S.E. River Street
Bloumstown, FL 32424

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, 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: *Glenda M. Hutzel* 1/30/06 850.352.4879