

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007944

FILED
Apr 30, 2008
Secretary of State

Entity Name: COGBF PRECIOUS SEEDS, INC.

Current Principal Place of Business:

1007 N MYRTLE AVE
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

1007 N MYRTLE AVE
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 90-0182572

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, HARVEY
1007 N MYRTLE AVE
CLEARWATER, FL 33755 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LAWRENCE, HARVEY
Address: 1541 LONG ST
City-St-Zip: CLEARWATER, FL 34615

Title: D () Delete
Name: WILLIAMS, CHERYL
Address: 1007 N MYRTLE AVE
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: MACK, MATTHEW
Address: 1007 N MYRTLE AVE
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: ELLIOTT, GRANT
Address: 1007 N. MYRTLE AVE
City-St-Zip: CLEARWATER, FL 33755

Title: S (X) Delete
Name: MORROW, RAYLINDA
Address: 1007 N. MYRTLE AVE
City-St-Zip: CLEARWATER, FL 33755

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:

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARVEY LAWRENCE

DP

04/30/2008

Electronic Signature of Signing Officer or Director

Date