

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32521

FILED  
Jan 23, 2006  
Secretary of State

**Entity Name:** FLORIDA CERTIFIED ORGANIC GROWERS & CONSUMERS, INC.

**Current Principal Place of Business:**

1810 NW 6TH ST  
SUITE F  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

1810 NW 6TH ST  
SUITE F  
GAINESVILLE, FL 32609 US

**Current Mailing Address:**

P.O. BOX 12311  
GAINESVILLE, FL 32604

**New Mailing Address:**

P.O. BOX 12311  
GAINESVILLE, FL 32604 US

**FEI Number:** 59-3006664

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MESH, MARTY  
1810 NW 6TH ST  
SUITE F  
GAINESVILLE, FL 32609 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: P ( ) Delete  
Name: OAKES, FRANK  
Address: 2064 ALAMANDA DR. #3  
City-St-Zip: NAPLES, FL 34102

Title: S ( ) Delete  
Name: SMITH, PAM  
Address: 1801 N W 11TH RD  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: FREEMAN, VICTORIA  
Address: 184 CHERRY ST.  
City-St-Zip: JACKSONVILLE, FL 32205

Title: T ( ) Delete  
Name: KAPPELMAN, MARTY  
Address: 300 SW 41ST ST.  
City-St-Zip: GAINESVILLE, FL 32607

Title: D (X) Delete  
Name: MORRIS, SUE  
Address: 11551 CR 721  
City-St-Zip: WEBSTER, FL 33597

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SMITH, PAM  
Address: 1801 NW 11TH RD  
City-St-Zip: GAINESVILLE, FL 32605 US

Title: VP (X) Change ( ) Addition  
Name: FREEMAN, VICTORIA  
Address: 1844 CHERRY ST  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: S (X) Change ( ) Addition  
Name: MORRIS, SUE  
Address: 1324 NORMANDY DR  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: D (X) Change ( ) Addition  
Name: MESH, MARTY  
Address: 1810 NW 6TH ST, STE F  
City-St-Zip: GAINESVILLE, FL 32609 US

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 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: MARTY MESH

D

01/23/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date