


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # N96000000975
 1. Entity Name
GROWN IN THE USA COALITION, INC.



Principal Place of Business Mailing Address
800 TRAFALGAR COURT **P.O. BOX 948153**
SUITE 200 **MAITLAND, FL 32794**
MAITLAND, FL 32751



04072008 No Chg-NP CR2E037 (4/06)

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4. FEI Number Applied For
59-3418839 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BROWN, REGGIE
800 TRAFALGAR COURT
SUITE 300
MAITLAND, FL 32751

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BUTLER, SCOTTIE J
STREET ADDRESS	5700 SW 34TH STREET
CITY-ST-ZIP	GAINESVILLE, FL 326147030
TITLE	D
NAME	BROWN, REGGIE
STREET ADDRESS	800 TRAFALGAR CT., STE. 300
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	D
NAME	CARUSO, LEWANNA
STREET ADDRESS	13121 NORTH MILITARY TRAIL
CITY-ST-ZIP	DELRAY BEACH, FL 33484
TITLE	D
NAME	RODRIGUEZ, J L
STREET ADDRESS	1451 WEST CYPRESS CREEK ROAD STE 211
CITY-ST-ZIP	FORT LAUDERDALE, FL 333091953
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/25/08-80046-011 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Reggie Brown** **04/11/08** **(407) 660-1949**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #