


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2005 08:00 AM
Secretary of State

DOCUMENT # N96000001605
 1. Entity Name
SUNSHINE AGRICULTURE INCORPORATED



Principal Place of Business 1801 HERMITAGE BLVD., SUITE 600 TALLAHASSEE, FL 32308	Mailing Address 1801 HERMITAGE BLVD., SUITE 600 TALLAHASSEE, FL 32308
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01312005 No Chg-NP CR2E037 (10/03)

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4. FEI Number 59-3375053	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 TODD, DAVID E
 1801 HERMITAGE BLVD.
 STE. 100
 TALLAHASSEE, FL 32308

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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, 2005

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

U00000215450
 02/05/05-60003-015 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BENNETT, DOUGLAS W 1801 HERMITAGE BLVD., SUITE 600 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVAS SMITH, JEFF 1801 HERMITAGE BLVD., SUITE 600 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVAT GRAY, LYNNE M 1801 HERMITAGE BLVD., SUITE 600 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MENEELY, JOHN H 801 WARRENVILLE RD., STE. 600 LISLE, IL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS MCDONALD, JACK 2200 ROSS AVE DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ALLISON, CHARLES 801 WARRENVILLE RD., STE. 600 LISLE, IL 60532

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: John Meneely **JOHN MENEELY** 1-31-05 630 810-1700
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #