

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000063446

Entity Name: LORIDA FEED, INC.

FILED
Jul 19, 2005
Secretary of State

Current Principal Place of Business:

1000 NE 24TH STREET
OKEECHOBEE, FL 34972

New Principal Place of Business:

850 NE 24TH STREET
OKEECHOBEE, FL 34972

Current Mailing Address:

1000 NE 24TH STREET
OKEECHOBEE, FL 34972

New Mailing Address:

850 NE 24TH STREET
OKEECHOBEE, FL 34972

FEI Number: 65-1020063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRELL, RICKEY L ESQ
1595 SE PORT LUCIE BLVD
PORT ST LUCIE, FL 34952 US

Name and Address of New Registered Agent:

NIX, NEIL C
850 NE 24TH AVE
OKEECHOBEE, FL 34972 US

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: NEIL C. NIX

07/19/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NIX, NEIL
Address: 5090 SOUTH US HWY ONE
City-St-Zip: FORT PIERCE, FL 34982

Title: DP () Delete
Name: NIX, NEIL C
Address: 1000 NE 24 AVE
City-St-Zip: OKEECHOBEE, FL 34972

Title: DS () Delete
Name: NIX, MARY
Address: 1000 NE 24TH AVE
City-St-Zip: OKEECHOBEE, FL 34972

Title: DT (X) Delete
Name: HAWK, PATRICIA
Address: 8850 CENTER ST EAST
City-St-Zip: OKEECHOBEE, FL 34972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change () Addition
Name: NIX, NEIL C
Address: 850 NE 24 AVE
City-St-Zip: OKEECHOBEE, FL 34972

Title: DS (X) Change () Addition
Name: NIX, MARY
Address: 850 NE 24TH AVE
City-St-Zip: OKEECHOBEE, FL 34972

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

SIGNATURE: MARY NIX

DS

07/19/2005

Electronic Signature of Signing Officer or Director

Date