2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000073950

1. Entity Name FOREVER FARM INC.



FILED Apr 04, 2007 08:00 A Secretary of State

Principal Place of Business

607 CINDY DRIVE WELLINGTON, FL 33414

Mailing Address

607 CINDY DRIVE WELLINGTON, FL 33414



DO NOT WRITE IN THIS SPACE

04012007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1034431 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RHODES, DENIS C 607 CINDY DRIVE WELLINGTON, FL 33414

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plions of registered agent. Signature, typed or printed name of registered agent and title if			egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		\$5.00 May Be Added to Fees	U00000689786 04/11/07-80047-025 150.00
10. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRECT D RHODES, DENIS C 607 CINDY DRIVE WELLINGTON, FL 33414 D RHODES, SYLVIA E 607 CINDY DRIVE	TORS			•
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	WELLINGTON, FL 33414				NOT WRITE THIS SPACE

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 607, 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:

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DENIS C. TWODES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/01

2007

561.784-8526

Daytime Phone #