

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005897

Entity Name: AGRILINK FLORIDA, INC.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

5400 C.R. 78A
ALVA, FL 33920

New Principal Place of Business:

5400 FT DENAUD ROAD
ALVA, FL 33920

Current Mailing Address:

2282 AIRPORT BLVD.
SANTA ROSA, CA 95403

New Mailing Address:

2282 AIRPORT BLVD.
SANTA ROSA, CA 95403

FEI Number: 65-1072098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, KATHY
5400 FT DENAUD RD
ALVA, FL 33920 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CAOR () Delete
Name: MOLLER, PETER
Address: 301 FIREWEED CT
City-St-Zip: WINDSOR, CA 95492

Title: CEOD () Delete
Name: HENNESSY, NIGEL
Address: 16 PHILLIPS STREET
City-St-Zip: THEBARTON, SA 5031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CAOR (X) Change () Addition
Name: MOLLER, PETER
Address: 16 PHILLIPS STREET
City-St-Zip: THEBARTON, SA 5031

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

SIGNATURE: KATHY JOHNSON

S/T

04/13/2006

Electronic Signature of Signing Officer or Director

Date