## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000060392

Name:

Address:

City-St-Zip:

HORNE, MONTE

713 14TH AVENUE EAST

CORDELE, GA 31015

Entity Name: SEA ISLE GROWERS, INC

FILED Jan 10, 2006 Secretary of State

Littly Nai	IIIE. SEA IS	LE GROVVERO, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
427 PIKE ( ADEL, GA	CREEK TUR 31620 U				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
427 PIKE ( ADEL, GA	CREEK TUR 31794 U				
FEI Number:	: 58-2642782	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
P.O. BOX HOBE SO! The above	UND, FL 33 named entit e of Florida.	475 US	ne purpose of changing its registered	d office or registered agent, or both,	
Electronic Signature of Registered Agent			Agent	Date	
Election Car	mpaign Financ	ing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HOLMES, JC 42 SHELLCF	( ) Delete DHN ACKER LANE /N, GA 30447	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PIRKLE, HAF	EEK TURF CIRCLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	VPD	( ) Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HAROLD L. PIRKLE TSD 01/10/2006