2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000060392

Entity Name: SEA ISLE GROWERS, INC.

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2420 SOUTH MILLEDGE AVENUE 1487 BLACKDIRT ROAD ATHENS, GA WHITESBURG, GA 30185 US **Current Mailing Address: New Mailing Address:** 2420 SOUTH MILLEDGE AVENUE 1487 BLACKDIRT ROAD ATHENS, GA WHITESBURG, GA 30185 US FEI Number: 58-2642782 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANDERS, CHARLES M 1485 50TH COURT VERO BEACH, FL 32966 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ROBERTS, DON Name: Name: U.S HWY 82, EAST Address: Address: City-St-Zip: BROOKFIELD, GA 31727 City-St-Zip: Title: VD Title: () Delete () Change () Addition MILBERGER, ARTHUR Name: Name: P.O BOX 350 Address: Address: BAY CITY, TX 77404 City-St-Zip: City-St-Zip: Title: Title: TSD () Delete () Change () Addition MCWHORTER, AARON Name: Name: 54 BROWN FARM RD. SW Address: Address: City-St-Zip: CARTERSVILLE, GA 30120 City-St-Zip: Title: () Delete Title: () Change () Addition DOUGET, DAVID Name: Name: Address: 802 HOWARD RD Address: City-St-Zip: POTEET, TX 78065 City-St-Zip: Title: Title: () Delete () Change () Addition MCCALL, WILEY Name: Name: 46470 FARABEE RD Address: Address: PUNTA GORDA, FL 33982 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition KERFOOT, HANK Name: Name: 8840 CAMDEN HWY Address: Address: City-St-Zip: City-St-Zip: REMBERT, SC 29128

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.

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SIGNATURE:	DON ROBERTS	PD	04/29/2003