2006 FOR PROFIT CORPORATION ANNUAL REPORT

06 APR 27 PM L: 19 DOCUMENT # P01000103056 SECRETARY OF SLATE SAN BONITA FARMS, INC. TALLAHASSEE, FLORID, Principal Place of Business Mailing Address 855 SAN BONITA BLVD 855 SAN BONITA BLVD HAVANA, FL 32333 HAVANA, FL 32333 04262006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 59-3751639 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HATCHER, THOMAS A DO NOT WRITE 855 SAN BONITA BLVD HAVANA, FL 32333 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE HATCHER, THOMAS A NAME STREET ADDRESS 855 SAN BONITA BLVD 600073982946 05/04/06--01015--011 **150.00 HAVANA, FL 32333 CITY-ST-ZIP VS HATCHER, JIMMY L JR. NAME STREET ADDRESS 810 SAN BONITA BLVD. CITY-ST-ZIP HAVANA, FL 32333 TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 supplier ental 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 fustee 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 the transpowered.

SIGNATURE:

STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

4-26-200b

150-539-8787

APPRUY AND

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