

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080902

Entity Name: REDFIELD FARMS, INC.

FILED
Jan 24, 2007
Secretary of State

Current Principal Place of Business:

5375 NW 115 AVE
OCALA, FL 34482

New Principal Place of Business:

Current Mailing Address:

1 CRICKET LANE
HAMILTON, VA 20158

New Mailing Address:

237 OLD TURNPIKE ROAD
CALIFON, NJ 07830

FEI Number: 54-2068209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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: D () Delete
Name: SPADONE, EMIL III
Address: 5375 NW 115 AVE
City-St-Zip: OCALA, FL 34482

Title: D () Delete
Name: ADAMSON, L. ALLYSON
Address: 1 CRICKET LANE
City-St-Zip: HAMILTON, VA 20158

Title: PRES () Delete
Name: SPADONE, EMIL J III
Address: 237 OLD TURNPIKE ROAD
City-St-Zip: CALIFON, NJ 07830

Title: S/T () Delete
Name: ADAMSON, L. ALLYSON
Address: 1 CRICKET LANE
City-St-Zip: HAMILTON, VA 20158

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SCHRODER, BASTIAN
Address: 237 OLD TURNPIKE ROAD
City-St-Zip: CALIFON, NJ 07830

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: SCHRODER, BASTIAN
Address: 237 OLD TURNPIKE ROAD
City-St-Zip: CALIFON, NJ 07830

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: EMIL SPADONE III

PRES

01/24/2007

Electronic Signature of Signing Officer or Director

_____ Date