

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90052 019 ***150.00

DOCUMENT # P02000089928

1. Entity Name

SUN COUNTRY AG, INC.



Principal Place of Business
400 N UNIVERSITY AVE
ARCHER FL 32618

Mailing Address
3352 BLITCHTON RD
OCALA FL 34475



2. Principal Place of Business - No P.O. Box #

13046 SW SR 45

3. Mailing Address

13046 SW. SR 45

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

ARCHER, FL

City & State

ARCHER, FL

4. FEI Number

38-3658935

Applied For

Not Applicable

Zip

32618

Country

U.S.A.

Zip

32618

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUSE, CHARLES JR
3352 BLITCHTON RD
OCALA FL 34475

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS HATCH, KENNETH W
CITY ST ZIP 3352 BLITCHTON RD
OCALA FL 34475

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trustee 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 other like empowered.

SIGNATURE:

Kenneth W Hatch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/7 352-351-8008
JREC JREC Phone #