

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061428

FILED  
Apr 13, 2004  
Secretary of State

Entity Name: ABC HONEY, INC.

## Current Principal Place of Business:

217 WEST PALMETTO ST.  
WAUCHULA, FL 33873

## New Principal Place of Business:

784 STEVE ROBERTS SPECIAL  
ZOLFO SPRINGS, FL 33890

## Current Mailing Address:

217 WEST PALMETTO ST.  
WAUCHULA, FL 33873

## New Mailing Address:

1687 GRIFFIN RD.  
WAUCHULA, FL 33873

FEI Number: 38-3681982

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAHLE, MARK F  
217 WEST PALMETTO ST.  
WAUCHULA, FL 33873

## Name and Address of New Registered Agent:

DAHLE, MARK F  
1687 GRIFFIN RD.  
WAUCHULA, FL 33873

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:

04/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CANTU, STEPHEN J  
Address: 784 STEVE ROBERTS SPECIAL  
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: D ( ) Delete  
Name: DRAKE, JOHN E  
Address: 1687 GRIFFIN RD.  
City-St-Zip: WAUCHULA, FL 33873

Title: D ( ) Delete  
Name: CANTU, LUCAS C  
Address: 545 COUNTY LINE RD. EAST  
City-St-Zip: BOWLING GREEN, FL 33834

Title: D ( ) Delete  
Name: SOUSA, JONAS S  
Address: 784 STEVE ROBERTS SPECIAL  
City-St-Zip: ZOLFO SPRINGS, FL 33890

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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.

SIGNATURE: JOHN E. DRAKE

D

04/13/2004

Electronic Signature of Signing Officer or Director

Date