2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 29, 2005 08:00 AM DOCUMENT # P03000109458 **Secretary of State** 1. Entity Name **HUNT & PECK EGG FARMS, INC.** Mailing Address Principal Place of Business 10322 SKEW LEE ROAD 10322 SKEW LEE ROAD THONOTOSASSA, FL 33592 IJS THONOTOSASSA, FL 33592_ No Chg-P CR2E034 (10/03) 04262005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0276055 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALBURY, KATHRYN F DO NOT WRITE 10322 SKEW LEE ROAD THONOTOSASSA, FL 33592 IN THIS SPACE 5. 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 aignature required when reinstating) DATE 9. Election Campaign Financing \$5,00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE ALBURY, KATHRYN F NAME STREET ADDRESS 10322 SKEW LEE ROAD THONOTOSASSA, FL 33592 CITY-ST-ZIP TITLE U00000342509 NAME 04/29/05-80058-022 150.00 STREET ADDRESS CMY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED