## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000131459

Entity Name: MJM TREE FARM, INC.

FILED Mar 15, 2007 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
oarrent i interpar i tace of basi	11000.	i illioipai i lace di Da.	JIII ~ JJ.

173 RED FERN RD 1873 WENTWORTH LN.

HAVANA, FL 323334407 GREEN COVE SPRINGS, FL 32043

Current Mailing Address: New Mailing Address:

P.O. BOX 180477 1873 WENTWORTH LN

TALLAHASSEE, FL 32318 GREEN COVE SPRINGS, FL 32043

FEI Number: 41-2119991 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CRUM, MARSHALL E DEVORE, JERALD C 173 RED FERN RD 1873 WENTWORTH LN.

HAVANA, FL 323334407 US GREEN COVE SPRINGS, FL 32043 US

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: JERALD C. DEVORE 03/15/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: O (X) Change ( ) Addition

 Name:
 CRUM, MARSHALL E
 Name:
 DEVORE, JERALD C

 Address:
 P.O. BOX 180477
 Address:
 1873 WENTWORTH LN.

City-St-Zip: TALLAHASSEE, FL 32318 City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 CRUM, MAX H
 Name:

 Address:
 ROUTE 1, BOX 350-A
 Address:

 City-St-Zip:
 CUTHBERT, GA 39840
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 DEVORE, JERALD C
 Name:

 Address:
 1873 WENTWORTH LANE
 Address:

 City-St-Zip:
 GREEN COVE SPRINGS, FL 32043
 City-St-Zip:

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: JERALD C. DEVORE O 03/15/2007