2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

BIGNATURE AND TYPED OR P

TED NAME OF SIGNING OF

FILED Apr 30, 2008 08:00 AM Secretary of State **DOCUMENT # P04000063057** 1. Entity Name GRANT FARMS, INC. Principal Place of Business Mailing Address 14345 PALM BEACH POINT BLVD 14345 PALM BEACH POINT BLVD WELLINGTON, FL 33414 WELLINGTON, FL 33414 04152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-4281357 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NATIONAL REGISTERED AGENTS, INC. DO NOT WRITE 501 BRICKELL KEY DR. SUITE 602 IN THIS SPACE MIAMI, FL 33131 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 remetating DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DP IITLE GRANT, MARY ANN NAME STREET ADDRESS 14345 PALM BEACH POINT BLVD CITY-ST-ZIP WELLINGTON, FL 33414 U00000935772 05/23/08-80083-021 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CJTY-ST-ZIP TITLE IN THIS SPACE 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 exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and facture 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 at other like empowered.

MARY ANN GRANT 3/16

Daytime Phone #