

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000065297

Entity Name: GOODMACH GROWERS, INC.

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

13659 HAYNES RD  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1707  
DOVER, FL 33527

**New Mailing Address:**

FEI Number: 87-0724970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOODSON, JOSEPH R  
13131 WALDEN SHEFFIELD RD  
DOVER, FL 33527 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GOODSON, JOSEPH R  
Address: P.O. BOX 1707  
City-St-Zip: DOVER, FL 33527

Title: D  
Name: MACHELL, STEPHEN  
Address: 3505 CASON RD  
City-St-Zip: PLANT CITY, FL 33566

Title: S  
Name: GOODSON, DONNA JO  
Address: P.O. BOX 1707  
City-St-Zip: DOVER, FL 33527

I hereby 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 all other like empowered.

SIGNATURE: DONNA JO GOODSON

S

01/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date