2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000149001

1. Entity Name OCTI-DRY INDUSTRIES, INC.



Principal Place of Business

Mailing Address

5188 NORTH U.S. HIGHWAY 441 LAKE CITY, FL 32055 US

5188 NORTH U.S. HIGHWAY 441 LAKE CITY, FL 32055 US

FILED Aug 04, 2008 08:00 AM Secretary of State



07032008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1807546 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CONNER, STEVEN W 1106 DARK AVENUE

DO NOT WRITE

ORANGE PARK, FL 32073			IN THIS SPACE				
	e named entity submits this statement for the pi tions of registered agent. Signature, typed or printed name of registered agent and tide if			gistered agent, or bo	-	l am familiar with, a	and accept
FILE NOWIII FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10.	OFFICERS AND DIREC	TORS	I				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BASS, IVY K 5188 NORTH U.S. HIGHWAY 441 LAKE CITY, FL 32055		,	•	Unnanaezi	nao	, ,
TITLE	VP				U00000957i 08/04/03-8000	08-026 158	. 75
NAME STREET ADDRESS CITY-ST-ZIP	BASS, IVY K 5188 NORTH U.S. HIGHWAY 441 LAKE CITY, FL 32055			.*			*
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC BASS, IVY K 5188 NORTH U.S. HIGHWAY 441 LAKE CITY, FL 32055			DO	NOT WRI	TE	*
TITLE NAME	TREA BASS, IVEY K			IN.	THIS SPAC	CE	<i>;</i> .
STREET ADDRESS CITY+ST-ZIP	5188 NORTH U.S. HIGHWAY 441 LAKE CITY, FL 32055		,	***		3	. *
TITLE NAME STREET ADDRESS CUTY-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 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:

TITLE NAME ---STREET ADDRESS

SIGNATURE AND TYPED OR RENTED NAME OF SIGNING OFFICER OR DIRECTOR