2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159240

Entity Name: CARL HIERS FARMS INC

13975 WEST STATE ROAD 78

MOORE HAVEN, FL 33471

Address: City-St-Zip: FILED Mar 28, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
Current	illicipai Fiace	or Business.	New Fillicipal Flace C	or Busiliess.	
	ST STATE RO IAVEN, FL 334				
Current Mailing Address:			New Mailing Address:		
	ST STATE RO IAVEN, FL 33				
FEI Number	: 20-1915197	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	ERS SR ST STATE RC IAVEN, FL 33				
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RF.				
Electronic Signature of Registered Agent			ent	t Date	
Election Car		g Trust Fund Contribution ().		2 4.10	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CARL, HIERS	STATE ROAD 78	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CARL, HIERS	STATE ROAD 78	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S (X JUDDIE, SUMN) Delete IERALL	Title: (Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: CARL HIERS, SR P 03/28/2005