

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000006542

FILED
Apr 14, 2009
Secretary of State

Entity Name: SOUTH FLORIDA AG SERVICES, INC.

Current Principal Place of Business:

18701 KITTY HAWK COURT
PORT ST. LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

18701 KITTY HAWK COURT
PORT ST. LUCIE, FL 34987

New Mailing Address:

FEI Number: 20-2167627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, ROBERT D
590 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUSBY, JAMES D II
Address: 18701 KITTY HAWK COURT
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: VP () Delete
Name: LANE, ROBERT L JR
Address: 5325 WILEY SCOTT ROAD
City-St-Zip: JAY, FL 32565

Title: VP () Delete
Name: FARMER, RICHARD L
Address: 9550 FRANGIPANI DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: S () Delete
Name: BUSBY, JAMES D II
Address: 18701 KITTY HAWK COURT
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: T () Delete
Name: BUSBY, JAMES D II
Address: 18701 KITTY HAWK COURT
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: VP () Delete
Name: BLACKER, BRANDON D
Address: 2207 COLUMBUS AVE
City-St-Zip: ALVA, FL 33920 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JAMES D BUSBY II

P

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date