

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000097554



1. Entity Name
SEED E-Z SEEDER INC

Principal Place of Business
1116 PEACHTREE DRIVE
LAKE PLACID, FL 33852-7184

Mailing Address
1116 PEACHTREE DRIVE
LAKE PLACID, FL 33852-7184



01182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
39-1676405

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COLLEY FINANCIAL SERVICES, INC.
209 US 27 S
LAKE PLACID, FL 33852

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

U00000610675
02/02/07-80032-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	PVP
NAME	TESCH, LESTER M JR.
STREET ADDRESS	1116 PEACHTREE DRIVE
CITY-ST-ZIP	LAKE PLACID, FL 338527184
TITLE	ST
NAME	TESCH, MARLYNN F
STREET ADDRESS	1116 PEACHTREE DRIVE
CITY-ST-ZIP	LAKE PLACID, FL 338527184
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Marlynn F. Tesch Marlynn F Tesch

Date

Daytime Phone #

1/26/07 8636996281