


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000021378	
1. Entity Name BUCHANAN FARMS, INC.	

Principal Place of Business 24 N HARBOR CITY BLVD MELBOURNE, FL 32935 US	Mailing Address 707 S WASHINGTON BLVD SARASOTA, FL 34236
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04272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3181126	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TOSCH, JOHN E C/O SARASOTA FORD 707 S WASHINGTON BLVD SARASOTA, FL 34236
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**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 reappointing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000741280 05/15/07-80024-004 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCHANAN, VERNON G 707 S WASHINGTON BLVD SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRODSKY, KEVIN S 24 N HARBOR CITY BLVD MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS TOSCH, JOHN E 707 S WASHINGTON BLVD SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HITEMAN, STEVE 707 S WASHINGTON BLVD SARASOTA, FL 34236
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/07

Date

Daytime Phone #