

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009824

Entity Name: MCLEAN AG CHEM, INC.

FILED
Feb 22, 2006
Secretary of State

Current Principal Place of Business:

1000 E HIGHWAY SO STE B
CLERMONT, FL 34711 US

New Principal Place of Business:

1000 E HIGHWAY 50
SUITE B
CLERMONT, FL 34711 US

Current Mailing Address:

PO BOX 1044
MINNEOLA, FL 34755 US

New Mailing Address:

FEI Number: 59-3330052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LANGLEY, RICHARD H
700 ALMONT STREET
CLERMONT, FL 34712 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: PD () Delete
Name: MCLEAN, WILLIAM B III
Address: 17514 COBBLESTONE LANE
City-St-Zip: CLERMONT, FL 34711

Title: VP () Delete
Name: MCLEAN, WILLIAM B JR
Address: 20574 SUGAR LEAF MOUNTAIN ROAD
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: MCLEAN, JOHN S
Address: 1745 U.S. HWY 27 SOUTH
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: MCLEAN, JOHN S
Address: 1745 US HWY 27 SOUTH
City-St-Zip: SEBRING, FL 33870

Title: D () Delete
Name: MCLEAN, MARK V
Address: 3700 RODEO DRIVE SOUTH
City-St-Zip: SEBRING, FL 33875

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:

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 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: WILLIAM B. MCLEAN, III

PD

02/22/2006

Electronic Signature of Signing Officer or Director

_____ Date