2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000055055

1. Entity Name
SOUTH EAST MUSHROOMS, INC.

Principal Place of Business	Mailing Address
12328 NW STATE RD 45 HIGH SPRINGS, FL 32643 US	12328 NW STATE RD 45 HIGH SPRINGS, FL 32643 US

04142005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3333840

Applied For ☐
Not Applicable ☐

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

6. Name and Address of Current Registered Agent

SHIVER, ARTHUR M
12328 NW STATE RD 45
HIGH SPRINGS, FL 32643

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 _____

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SHIVER, ARTHUR M
STREET ADDRESS	12328 NW STATE RD 45
CITY ST ZIP	HIGH SPRINGS, FL 32643
TITLE	ST
NAME	SHIVER, RENNEE
STREET ADDRESS	12328 NW STATE RD 45
CITY ST ZIP	HIGH SPRINGS, FL 32643
TITLE	VP
NAME	SHIVER, HUGH
STREET ADDRESS	12314 NW SR 45
CITY ST ZIP	HIGH SPRINGS, FL 32643
TITLE	VP
NAME	SHIVER, CHRISTINE
STREET ADDRESS	12314 NW SR 45
CITY ST ZIP	HIGH SPRINGS, FL 32643
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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04/15/05-80024-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Arthur M. Shiver 4-11-05 ARTHUR M. SHIVER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR