

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000092920

Entity Name: RICHLAND FARMS, INC.

FILED
Mar 11, 2005
Secretary of State

Current Principal Place of Business:

10651 BECKUM RD.
DADE CITY, FL 33525

New Principal Place of Business:

Current Mailing Address:

10651 BECKUM RD.
DADE CITY, FL 33525

New Mailing Address:

FEI Number: 59-3365081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHIS, STANLEY P
5605 MATHIS ST
ZEPHYRHILLS, FL 33512 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: C () Delete
Name: MATHIS, GENEVA
Address: 5605 MATHIS ST
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: SD () Delete
Name: MATHIS, GREGORY
Address: 9042 23RD ST
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: PD () Delete
Name: MATHIS, STANLEY
Address: 5605 MATHIS ST
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: MD () Delete
Name: MATHIS, CHRISTOPHER
Address: 10651 BECKUM RD
City-St-Zip: DADE CITY, FL 33525

Title: TD () Delete
Name: HARDIN, RONALD
Address: 31715 SHIN CRT
City-St-Zip: WESLEY CHAPEL, FL 33544

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 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 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: STANLEY MATHIS

PD

03/11/2005

Electronic Signature of Signing Officer or Director

_____ Date