2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000095773

Entity Name: FRIERSON FARMS, INC.

FILED Feb 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5050 E CR 720 MOORE HAVEN, FL 33471 LIS **Current Mailing Address: New Mailing Address:** PO BOX 1686 CLEWISTON, FL 33440 FEI Number: 65-0678246 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAMMOCK, ALAN HAMMOCK, ALAN PO BOX 1686 5040 E CR 720 CLEWISTON, FL 33440 MOORE HAVEN, FL 33471 US US

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:

Date

Electronic Signature of Registered Agent

02/15/2007

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PAS () Delete PLATT, LOUVE S Name:

5050 E CR 720 Address:

City-St-Zip: MOORE HAVEN, FL 33471

Title: **VPST** () Delete Name: HAMMOCK, ALAN

5050 E CR 720 Address:

MOORE HAVEN, FL 33471 City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: **VPST** (X) Change () Addition

HAMMOCK, ALAN Name: Address: 5040 E CR 720

MOORE HAVEN, FL 33471 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 Statutés. 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: ALAN HAMMOCK **VPST** 02/15/2007