## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000003056

FILED Apr 28, 2004 Secretary of State

DO 001/11/1/1/1/1/1/000000000000000000000	Occircially of Glate
Entity Name: MUSSER POULTRY FARM, INC.	
Current Principal Place of Business:	New Principal Place of Business:
11731 BRIGHTWATER CT HOMOSASSA, FL 34487	
Current Mailing Address:	New Mailing Address:
PO BOX 832 HOMOSASSA, FL 34487	
FEI Number: 65-0222120 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:
MUSSER, WILLIAM 11731 BRIGHTWATER CT HOMOSASSA, FL 34487	
The above named entity submits this statement for the puin the State of Florida.	urpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Ager	nt Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: DTC ( ) Delete	Title: TC (V) Change ( ) Addition

Title: ( ) Delete Title: (X) Change ( ) Addition MUSSER, WILLIAM MUSSER, WILLIAM Name: Name: P.O. BOX 832 Address: P.O. BOX 832 Address: City-St-Zip: HOMOSASSA, FL 34487 City-St-Zip: HOMOSASSA, FL 34487

 Name:
 KNEPPER, JEANNE G

 Address:
 Address:
 P.O. BOX 120

City-St-Zip: City-St-Zip: HOMOSASSA, FL 34487

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: JEANNE KNEPPER P 04/28/2004