

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000011693

Entity Name: FLORIDA AGRIPROPERTIES, INC.

FILED  
Mar 23, 2009  
Secretary of State

**Current Principal Place of Business:**

3 SEAHORSE LANE  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

3 SEAHORSE LANE  
VERO BEACH, FL 32960

**New Mailing Address:**

FEI Number: 65-0809875

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FEE, FRANK H III, ESQ  
401 SOUTH INDIAN RIVER DRIVE  
FORT PIERCE, FL 34950 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: BEALE, MARY SUE  
Address: 3 SEAHORSE LANE  
City-St-Zip: VERO BEACH, FL 32960

Title: V ( ) Delete  
Name: MILLS, WILLIAM  
Address: 800 8TH STREET  
City-St-Zip: VERO BEACH, FL 32962

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: MARYSUE BEALE

PD

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date