2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2005
Secretary of State

DOCUMENT# P99000053345

Entity Name: CRP FARMS, INC.

Current Principal Place of Business:

901 W BASE STREET
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

901 W BASE STREET
MADISON, FL 32340

New Mailing Address:

FEI Number: 58-2474569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHNITKER, CLAY A
901 W BASE STREET
MADISON, FL 32340 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: PRIMM, CHRIS D
Address: 2595 N TOY DRIVE
City-St-Zip: FAYETTEVILLE, AR 72704

Title: VD ( ) Delete
Name: PRIMM, ROYCE
Address: 2595 N TOY DRIVE
City-St-Zip: FAYETTEVILLE, AR 72704

Title: STD ( ) Delete
Name: PRIMM, ROBIN L
Address: 3406 PAR COURT
City-St-Zip: FAYETTEVILLE, AR 27203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change ( ) Addition
Name: PRIMM, ROBIN L
Address: 2595 N TOY DRIVE
City-St-Zip: FAYETTEVILLE, AR 27204

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: CHRIS D. PRIMM PD 02/27/2005

Electronic Signature of Signing Officer or Director — Date