


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 08:00 A
Secretary of State

DOCUMENT # S20635
 1. Entity Name
FLORIDA AGRI MANAGEMENT COMPANY



Principal Place of Business
 23351 N. RIVER ROAD
 ALVA, FL 33920 US

Mailing Address
 23351 N. RIVER ROAD
 ALVA, FL 33920 US

DO NOT WRITE IN THIS SPACE



01042007 No Chg-P CR2E034 (11/05)

4. FCI Number
 65-0236929 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BEALE, JOSEPH E., JR.
 23351 NORTH RIVER ROAD
 ALVA, FL 33920

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPSD
NAME	BROWN, EDGAR A.
STREET ADDRESS	13939 INDRIQ RD.
CITY ST ZIP	FT PIERCE, FL
TITLE	PTD
NAME	BEALE, JOSEPH E JR
STREET ADDRESS	4511 SW 8TH AVE
CITY ST ZIP	VERO BEACH, FL 32968
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR