## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

S67088

(2)

**DOCUMENT** # 1. Corporation Name

AGRI-GRO OF FLORIDA, INC.



Principal Place o	f Rucinees	Mailing Address					
534 S DILLARI WINTER GRAD	D STREET	534 S DILLARD STRE	534 S DILLARD STREET WINTER GRADEN FL 34787				
					3. Date Incorporated or Qualified 07/15/1991	3a. Date of Last R 03/20/19	•
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number	<del></del>	Applied For
11		26			59-3080219		Not Applicable  Additional
Suite, Apt. #,	, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
3		28			Trust Fund Contribution		d to Fees
Zip	Country	Zφ	Country		8. This corporation has liability for Florida Statutes		199.032,
4	25 g. Name and Address of Currer	29	[30]		10. Name and Address of New F	-	
	g, Name and Address of Currer	it registered Agent	81	Name			
HATI EV	JAMES R		82	Straat Add	ress (P.O. Box Number is Not Acceptab	ole)	
	LLARD STREET		82 Street Adi		10.5 II . O. Dok 10.1 I		
	GARDEN FL 34787		83		-		
			84	City		<b>85</b> Z	ıp Code
				L	ration submits this statement for the pu	FL ST	rogistorost office
SIGNATURE 2		ID DIRECTORS	13.	d signature require	Hatley  ADDITIONS/CHANGES TO OF	FICERS AND DIRECT	
TITLE	DST	☐ DELETE	1 1 TITLE			Change	El Madrion
NAME	HATLEY, JAMES R 534 S DILLARD ST		1.2 NAME	ADORESS			
STREET ADDRESS CITY-ST-ZIP	WINTER GARDEN FL			ST - ZIP	aid 34787		
TITLE	PD				9-7	Change	★ Addition
NAME	SESSIONS, JOHN F		2.2 NAME				
STREET ADDRESS	5951 Arlington Expwy		2 3 STREE	T ADDRESS	дір) 34787 Зір 32211		
CiTY-S1-ZIP	JACKSONVILLE FL	C COLUM	2 4 CITY - \$1 - ZIP		34 32211	☐ Change	☐ Add tion
TITLE		☐ DELFTE	3 1 THLE 3 2 NAME				
NAMÉ CTREET ADORECS				T ADDRESS			
STREET ADORESS CITY-ST-ZIP			3.4 CITY -				
TITLE	☐ DELETE		4. 1 TITLE			☐ Change	☐ Addition
NAME			4.2 NAME				
STREET ADDRESS				LADDRESS			
CITY - ST - ZIP		DELETE	4.4 CHY - 5.1 TITLE			Change	Addition
TITLE		L) becale	5.2 NAME				_
NAME STREET ADORESS				1 ADDRESS			
CITY-ST-ZIF			5.4 CiTy -				
TITLE	DELETE		6 1 TIFLE			☐ Change	e 🔲 Addition
NAME			6.2 NAME	1			
STREET ADDRESS				T ADDRESS			
CITY - \$1 - 2IF	CV II it has information a made	N with this filtre is valuat vily f	64 CHY-	S1-7IP       es not qualify	for the exemption stated in Section 11	9.07(3)(k), Florida Stal	tutes. I further

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: June Retailey James R. Hatley 4/11/96 407/656-2808

CR2E034 (12/95)