


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**


**FILED**  
**May 03, 2007 8:00 am**  
**Secretary of State**

05-03-2007 90068 041 \*\*\*150.00

<b>DOCUMENT # V56576</b> 1. Entity Name ASSOCIATED SEED AND PLANT, INC.	
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Principal Place of Business 1141 GULFSTREAM WAY SINGER ISLAND, FL 33404	Mailing Address 1141 GULFSTREAM WAY SINGER ISLAND, FL 33404 US
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<b>DO NOT WRITE IN THIS SPACE</b>
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03272007	No Chg-P CR2E034 (11/05)
4. FEI Number 65-0355564	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b>  WEYAND, WILLIAM G 1147 GULFSTREAM WAY RIVIERA BEACH, FL 33404
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. WEYAND, WILLIAM G. 1141 GULFSTREAM WAY RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST. CHISHOLM, MARTHA 1141 GULFSTREAM WAY RIVIERA BEACH, FL 33404
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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.	
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<b>SIGNATURE:</b> 	3/27/07	561 844 0930
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>