2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P94000013212 FLORIDA AGRI-FINANCE, INC. Principal Place of Business Mailing Address 151 CARIBBEAN RD. 151 CARIBBEAN RD. NAPLES FL 34108-3408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

GRANT, GARY W

SIGNATURE

11.

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

151 CARIBBEAN RD. NAPLES FL 34108

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

GRANT, GARY W

151 CARIBBEAN RD.

NAPLES FL 34108

GRANT, SUSAN C

NAPLES FL 34108

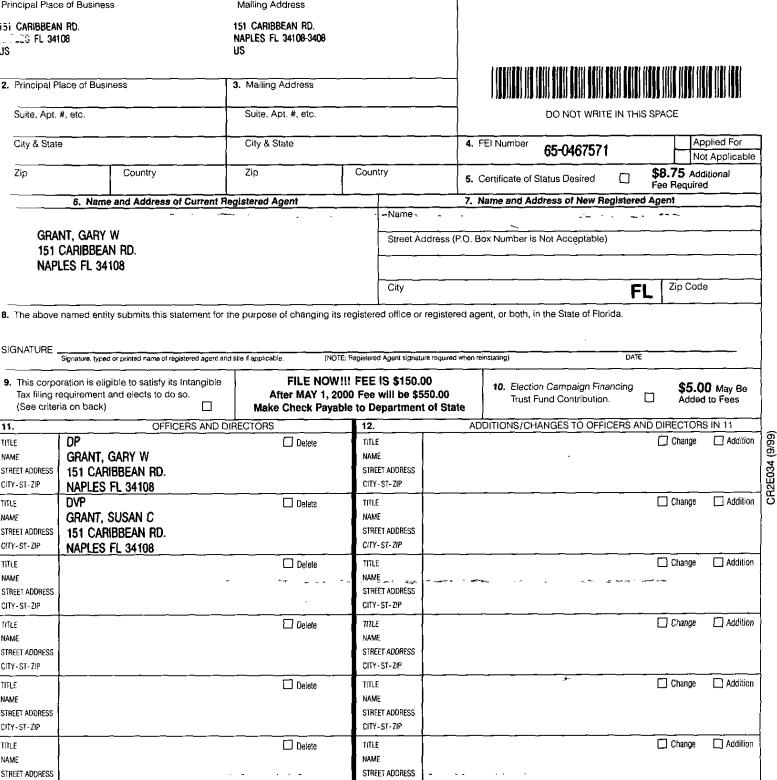
151 CARIBBEAN RD.

(See criteria on back)

DP

FILED May 03, 2000 8:00 am Secretary of State

05-03-2000 90091 049 ***150.00



e not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information rate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director cute that report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this filing indicated on this report or supplemental re-of the corporation or the receiver or trustee. t is true and changed, or on an attachment with an

-Name -

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

TITLE

NAME

NAME

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIF

CITY-ST-ZIF

SIGNATURE:

-25-00