


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # 357761
 1. Entity Name
 KILGORE SEED COMPANY



Principal Place of Business
 256 NW CHARLOTTE GLEN
 LAKE CITY, FL 32055

Mailing Address
 P O BOX 2082
 LAKE CITY, FL 32056

DO NOT WRITE IN THIS SPACE



04262005 No Chg-P CR2E034 (10/03)

4. FEI Number
 59-1417160 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

HUNZIKER, J HAROLD
 256 N.W. CHARLOTTE GLEN
 LAKE CITY, FL 32055

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HUNZIKER, J HAROLD
STREET ADDRESS	256 N.W. CHARLOTTE GLEN
CITY-ST-ZIP	LAKE CITY, FL 32055
TITLE	VD
NAME	PERRON, LYDIA H
STREET ADDRESS	5310 HAWFORD CIRCLE
CITY-ST-ZIP	ORLANDO, FL 32812
TITLE	STD
NAME	HUNZIKER, PATRICIA
STREET ADDRESS	256 N.W. CHARLOTTE GLEN
CITY-ST-ZIP	LAKE CITY, FL 32055
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/29/05-80055-023 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: J. Harold Hunziker J. HAROLD HUNZIKER 4/26/05 386-754-1938
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone if