

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000008676

Entity Name: AMERICAN GROWN INC.**Current Principal Place of Business:**12008 MICCOSUKEE ROAD
TALLAHASSEE, FL 32309**Current Mailing Address:**12008 MICCOSUKEE ROAD
TALLAHASSEE, FL 32309 US**FEI Number:** 84-2893273**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARTMAN, DANIEL W
2865 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D, PRESIDENT
Name	CHILES, LAWTON III
Address	12008 MICCOSUKEE ROAD
City-State-Zip:	TALLAHASSEE FL 32309

Title	SECRETARY, TREASURER
Name	WADE, BRANDON
Address	1386 US HWY 1 SOUTH
City-State-Zip:	ALMA GA 31570

Title	DIRECTOR
Name	CORNELIUS, ALEX MR.
Address	6844 CORNELIUS ROAD
City-State-Zip:	MANOR GA 31550

Title	CHAIRMAN
Name	MORGAN, DISKIN
Address	245 PRESTON DRIVE
City-State-Zip:	DOUGLAS GA 31535

Title	DIRECTOR
Name	FERGUSON, BRADLEY MR.
Address	12829 E. CR 1474
City-State-Zip:	GAINESVILLE FL 32641

Title	DIRECTOR
Name	WATTS, JASON
Address	5051 WHITE CLAY PIT ROAD
City-State-Zip:	HAINES CITY FL 33844

Title	DIRECTOR
Name	REGISTER, DAN
Address	2162 VALDOSTA HIGHWAY
City-State-Zip:	HOMERVILLE GA 31634

Title	MR.
Name	KUHN, TRAVIS
Address	12008 MICCOSUKEE ROAD
City-State-Zip:	TALLAHASSEE FL 32309

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAWTON M. CHILES III**PRESIDENT****01/18/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date