

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H17503

Entity Name: GREENVILLE FERTILIZER & CHEMICAL CO., INC.

Current Principal Place of Business:

13293 W 90
GREENVILLE, FL 32331

Current Mailing Address:

P.O. BOX 649
GREENVILLE, FL 32331 US

FEI Number: 59-2437099

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROLAND, CHARLES A
13293 W 90
GREENVILLE, FL 32331 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 | P | Title | V |
| Name | ROLAND, CHARLES A | Name | ROLAND, CHARLES A. |
| Address | 3863 NW LOVETT RD. | Address | 3863 NW LOVETT RD. |
| City-State-Zip: | GREENVILLE FL 32331 | City-State-Zip: | GREENVILLE FL 32331 |
| | | | |
| Title | TS | Title | MANAGER |
| Name | ROLAND, JO ANN B. | Name | ROLAND, EARLENE C |
| Address | 3863 NW LOVETT RD. | Address | P.O. BOX 649 |
| City-State-Zip: | GREENVILLE FL 32331 | City-State-Zip: | GREENVILLE FL 32331 |

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EARLENE C. ROLAND

MANAGER

06/09/2015

Electronic Signature of Signing Officer/Director Detail

Date