2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2015
Secretary of State
CC1676764039

DOCUMENT# S19214

Entity Name: TRANS-PHOS, INC.

Current Principal Place of Business:

4001 NORALYN MINE RD.
BARTOW, FL 33830

Current Mailing Address:

PO BOX 9004
BARTOW, FL 33831 US

FEI Number: 59-3042773

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITNEY, RICHARD, L
NORALYN MINE RD & S.R. #640
BARTOW, FL 33830 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	PD
Name	WHITNEY, RICHARD L.
Address	4001 NORALYN MINE RD.
City-State-Zip:	BARTOW FL 33830

Title	VD
Name	WHITNEY, WILLIAM A.
Address	4001 NORALYN MINE RD.
City-State-Zip:	BARTOW FL 33830

Title	VDST
Name	WHITNEY, DAVID
Address	4001 NORALYN MINE RD.
City-State-Zip:	BARTOW FL 33830

Title	D
Name	PAT, MORAN
Address	15301 VIADE LAS OIAS
City-State-Zip:	PACIFIC PALISADES CA 90272

Title	DIRECTOR
Name	WHITNEY, ROBERT L
Address	4001 NORALYN MINE RD.
City-State-Zip:	BARTOW FL 33830

Title	ATAS
Name	BEDFORD, HARRY SIII
Address	4001 NORALYN NINE ROAD
City-State-Zip:	BARTOW FL 33830

Title	DIRECTOR
Name	WHITNEY, WILLIAM N
Address	4001 NORALYN MINE RD
City-State-Zip:	BARTOW FL 33831

Title	DIRECTOR
Name	WHITNEY, RICHARD C
Address	4001 NORALYN MINE RD
City-State-Zip:	BARTOW FL 33831

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: HARRY S BEDFORD — ASST SECRETARY — 02/20/2015

Electronic Signature of Signing Officer/Director Detail — Date