

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S19214

Entity Name: TRANS-PHOS, INC.

Current Principal Place of Business:

4201 BONNIE MINE ROAD
MULBERRY, FL 33860

Current Mailing Address:

PO BOX 9004
BARTOW, FL 33831 US

FEI Number: 59-3042773

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WHITNEY, RICHARD C
4201 BONNIE MINE ROAD
MULBERRY, FL 33860 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: RICHARD C WHITNEY

04/09/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name WHITNEY, RICHARD L.
Address 4201 BONNIE MINE ROAD
City-State-Zip: MULBERRY FL 33860

Title DIRECTOR
Name WHITNEY, WILLIAM A.
Address 4201 BONNIE MINE ROAD
City-State-Zip: MULBERRY FL 33860

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

Title DIRECTOR
Name WHITNEY, ROBERT L
Address 4201 BONNIE MINE ROAD
City-State-Zip: MULBERRY FL 33860

Title COO, DIR
Name WHITNEY, WILLIAM N
Address 4201 BONNIE MINE ROAD
City-State-Zip: MULBERRY FL 33860

Title PRESIDENT, CEO, DIRECTOR
Name WHITNEY, RICHARD C
Address 4201 BONNIE MINE ROAD
City-State-Zip: MULBERRY FL 33860

Title DIRECTOR
Name WHITNEY, DAVID
Address PO BOX 9004
City-State-Zip: BARTOW FL 33831

Title TREASURER, ASST. SECRETARY,
CFO
Name FARREN, MAGDA A. S.
Address PO BOX 9004
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: JASON THEOBALD

CONTROLLER

04/09/2018

Electronic Signature of Signing Officer/Director Detail

Date