2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S19214

Entity Name: TRANS-PHOS, INC.

Current Principal Place of Business:

5020 OLD STATE HWY 37 MULBERRY, FL 33860

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, WILLIAM A. 5020 OLD STATE HWY 37 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: WILLIAM A. WHITNEY 02/11/2025

Electronic Signature of Registered Agent

Date

FILED Feb 11, 2025

Secretary of State

0964926023CC

Officer/Director Detail:

Title CHAIRMAN, COO Title DIRECTOR

NameWHITNEY, WILLIAM A.NameWHITNEY, WILLIAM A.Address5020 OLD STATE HWY 37Address5020 OLD STATE HWY 37City-State-Zip:MULBERRY FL 33860City-State-Zip:MULBERRY FL 33860

Title SECRETARY, DIRECTOR Title DIRECTOR

NameMORAN, PATNameWHITNEY, ROBERT LAddress15301 VIADE LAS OIASAddress5020 OLD STATE HWY 37City-State-Zip:PACIFIC PALISADES CA 90272City-State-Zip:MULBERRY FL 33860

Title CEO, DIR, PRESIDENT Title DIRECTOR

Name WHITNEY, WILLIAM N Name WHITNEY, DAVID
Address 5020 OLD STATE HWY 37 Address PO BOX 9004

City-State-Zip: MULBERRY FL 33860 City-State-Zip: BARTOW FL 33831

Title VP Title CONTROLLER

Name MCGEE, KEVIN Name SARASIN, DONALD

Address 5020 OLD STATE HWY 37 Address 5020 OLD STATE HWY 37

City-State-Zip: MULBERRY FL 33860 City-State-Zip: MULBERRY FL 33860

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: DONALD SARASIN CONTROLLER 02/11/2025

Electronic Signature of Signing Officer/Director Detail

Date