

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # 196114 1. Entity Name FARMER & IRWIN CORP.		
Principal Place of Business STEVEN R IRWIN 3300 AVENUE K RIVIERA BEACH, FL 33404-2138	Mailing Address STEVEN R IRWIN 3300 AVENUE K RIVIERA BEACH, FL 33404-2138	



04072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0864802	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

5. Name and Address of Current Registered Agent

**IRWIN, STEVEN R
3300 AVENUE K
RIVIERA BEACH, FL 33404**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IRWIN, STEVEN R 6029 WOODLAKE RD JUPITER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS FARMER, ROBERT E JR 8493 EGRET MEADOW LANE WEST PALM BEACH, FL 33412
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TSURUTOME, GEORGE 1398 SW 14TH DR BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDAS LONG, ALAN D 5334 SE INLET PLACE STUART, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD IRWIN, JEFFREY G 18179 121ST TERRACE NORTH JUPITER, FL 33478
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD IRWIN, RANDALL L 19150 SE JUPITER RD. JUPITER, FL 33458

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04/09/05-80067-022 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alan D. Long
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN D. LONG V.P.

Date

4/7/2005

Daytime Phone #

561-842-5316