

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 320371

FILED  
Jan 16, 2012  
Secretary of State

**Entity Name:** VO-LASALLE FARMS INCORPORATED

**Current Principal Place of Business:**

601 JOHNSON LAKE RD  
DELEON SPRINGS, FL 32130

**New Principal Place of Business:**

**Current Mailing Address:**

601 JOHNSON LAKE RD  
DELEON SPRINGS, FL 32130

**New Mailing Address:**

FEI Number: 59-1214274

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CRUMP, SYLVIA S  
601 JOHNSON LK RD  
DELEON SPRGS, FL 32130 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CRUMP, STEVEN S  
Address: 701 JOHNSON LK.RD.  
City-St-Zip: DELEON SPRINGS, FL 32130 US

Title: TR/S  
Name: CRUMP, SYLVIA S  
Address: 601 JOHNSON LK RD  
City-St-Zip: DELEON SPRINGS, FL 32130 US

Title: VP  
Name: CRUMP, ROGER M  
Address: 5415 HARBOR RD  
City-St-Zip: BRADENTON, FL 34209 US

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: STEVEN S. CRUMP

P

01/16/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date