

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90322 012 ***150.00

DOCUMENT # 339157

1. Entity Name

PERKINS FARMS, INC.

Principal Place of Business: HWY 441 SE #253, FL 34974
 Mailing Address: 13801 HWY 441 SE #253, OKEECHOBEE FL 34974-2012, US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.
 City & State
 4. FEI Number: 59-1264886
 Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75-Additional Fee Required**

6. Name and Address of Current Registered Agent: CORBIN, KENDRA J, 13801 HIGHWAY 441 SE LOT 253, OKEECHOBEE FL 34974
 7. Name and Address of New Registered Agent: Name, Street Address (P.O. Box Number is Not Acceptable), City, FL, Zip Code

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.

SIGNATURE: _____ DATE: _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME STREET ADDRESS CITY - ST - ZIP	TITLE	NAME STREET ADDRESS CITY - ST - ZIP
PO	CORBIN, KENDRA J 13801 HWY 441 SE #253 OKEECHOBEE FL 34974		
VP	PERKINS, STACEY L 13801 HWY 441 SE #253 OKEECHOBEE FL 34974		
S	PERKINS, JENNIFER L 13801 HWY 441 SE #253 OKEECHOBEE FL 34974		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other filers empowered.

[Signature] Date: 4/5/00 Daytime Phone #: 561-753-6511