FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 681842

(1)

CHAVERS FARM, INC.

FILED Mar 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						T PROVING BUIDA JOIGE HARDI TOURI BUDIU E	EI GIBII BIBII EI	811 813 11 919 1	II 01071 IUDI
PO BOX 2095		P.O. BOX 1068	P.O. BOX 1068						
PACE FL 3257	11-0295	PACE FL 32571-0295			DO NOT WRITE IN THIS SPACE				
		US				3. Date Incorporated or Qualified	E IN THIS ST	AUL	<u>-</u>
						08/05/1980			
2. Principal Pr	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		A	oplied For
21		26				26-7201985		N/	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_			5. Certificate of Status Desired			Additional
22		City P. Stoto	City & State						equired
City & State	28					6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	7 _(p)	Cou	ntry		8. This corporation owes or has p			
24	25	29	30	-		Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	egistered A	gent	•
CH.	AVERS, TILDON L.			81 1	Name				
5460 LEM STREET				82 5	Street Addres	ress (P.O. Box Number is Not Acceptable)			
MILTON FL 32570									
				83					
				84 (City			85 Zip	Code
44.6	to the provisions of Sections 607.0502) - 1007 4600 Finance Day				and a substitution at the substitution and for the	FL	honding	to registered
office or re	o the provisions of Sections 607.050, egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was a	es, me al authorized	d by th	e corporatio	n's board of directors. I hereby acce	pt the appo	intment as	registered
		itions of Section 607.0505, Fl			, ,		9 15	00	
SIGNATURE	Signature, typed or profiled itures conjectured age	and life if applicable (NOT	É Figgistered	Agent s	ignature required	Mayers - Mes.	DATE	1-78	l,
12.	OFFICERS AND	DIFFICTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	RS IN 12
TITLE	PD	DELETE	1.1 Til	TLE			T.	Change	☐ Addition
NAME	CHAVERS, TILDON L		1.2 NAME						l:
STREET ADDRESS			1.3 ST	REET ADI	DAESS				
CITY-ST-ZIP			TY-S1-Z	!IP			700000	T seems	
TITLE	OHALERO ANNIE D		2 1 TI				L	Change	Addition
NAME	5460 LEM STREET		2.2 NAI 2.3 STR		00000				i
STREET ADDRESS	MILTON, FL 00000 FL 32570		2.3 Sth						
CITY-ST-ZIP TITLE			3.1 TII		Zir		7	Change	Addition
NAME	CHAVERS, TILDON, JR		3.2 NA		1			•	_
STREET ADDRESS	4381 STEPHENS ROAD			REET AD	DAESS				
CITY-ST-ZIP	DACE EL			ITY-ST-					
TITLE		DELETE	4.1 Til					Change	Addition
NAME			4. 2 N	AME	1				1
STREET ADDRESS			4.3 ST	REET AD	ORESS				İ
City-St-Zip			4.4 CI	1Y-\$1-Z	MP				
TITLE		DELETE	5.1 TI		1		L	Change	Addition
NAME			5.2 NA						
STREET ADDRESS				REET AD	1				1
CITY-ST-ZIP	<u></u>	Librity		TY-ST-Z	IP			Change	Addition
TITLE		☐ DELETE	6.1 11				L	_i circing	LJ 70010011
NAME PROFEST ADDRESS			6.2 N		DDECC				†
STREET ADDRESS				REET AD					
City-St-ZiP 14. Thereby o	certify that the information supplied wi	th this filing does not dualify f	or the exe	TY-ST-Z	n stated in S	ection 119.07(3)(i), Florida Statutes.	I further cert	ify that the	Information

indicated on this annual report or supplied with this ming doors to you 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 concention or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an altertiment with an advices.