FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

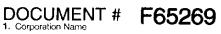
PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Sccretary of State

DIVISION OF CORPORATIONS

1996



(5)

ANTIOCH FARMS FEED & GRAIN CORPORATION



Principal Place of Business Mailing Address								
4401 N. COC PLANT CITY			4401 N. COOPER ROAD PLANT CITY FL 33565					
						3. Date Incorporated or Qualified 3a. Date of Last Report 02/01/1982 05/31/1995		
,	ace of Business	2a. Mailing Add	dress			4. FEI Number Applied Fo	or	
21	N	26				59-2181091 Not Applic	able	
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired \$8.75 Additional	al	
City & State	<u> </u>	27 City & State				Fee Required		
23		28	6			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Ζ ιρ	Country	Zip	C	ountry	,	This corporation has liability for intangible tax under s 199,032,		
24	25	29	30			Florida Statutes Yes No		
	9. Name and Address of Cu	ırrent Registered Agen	ŧ			10. Name and Address of New Registered Agent		
				81	Nam	me		
SILLS, T				82	Stree	reet Address (P.O. Box Number is Not Acceptable)		
	COOPER RD.			ļ				
PLANT (CITY FL 33565			83				
				84	City	y 85 Zip Code		
Oi legiatei	to the provisions of Sections 607.6 ed agent, or both, in the State of th, and accept the obligations of	FIGURAL SUCH CHARGE WA	s aumorized by the	pove i	narned oration	d corporation submits this statement for the purpose of changing its registered agon's board of directors. I hereby accept the appointment as registered agent. I a	office im	
SIGNATURE	Signature, typed or printed near-c of registered							
12.		S AND DIRECTORS	(NOTE HIGGSE		4 signatu	incurrequired when renstatings ADDITIONS/OHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DE		TITLE		Change Addit	tion	
NAME	SILLS, TONY		12	NAME				
STREET ADDRESS	4401 N. COOPER RD.		1.3	STREET	ADDRES	ESS		
CHTY - ST - 7IP	PLANT CITY, FL 00000		14	CITY - S	31 - ZIP			
TITLE	STD	☐ DE	ELETE 2 1	TITLE		☐ Change ☐ Addit	lion	
NAME	SILLS, LOIS		22	NAME				
STREET ADDRESS	4401 N. COOPER RD.		23	STREET	ADDRES	ESS		
CITY-ST-ZIP TITLE	PLANT CITY, FL 00000	DE		CITY S	T - Z(F			
NAME			į.	TITLE		Change Change Add-ti	ion	
STREET ADDRESS				NAME	ADDRES	KCL .	1	
CITY - ST - ZIP				CHY-S				
TITLE		DE		TITLE	o - EIF	Change Addit	ion	
NAME			4 2	NAME				
STREET ADDRESS			43	STREET	ADDRES!	rss	ĺ	
CITY+ST-ZIP				CITY-S	T - Z:P			
TITLE		DE	LETE 5 1	TITLE		Change Additi	ion	
NAME			5.2	NAMÉ				
STREET ADDRESS			5 3	STHEEL	ADDRESS	ESS		
CITY-S!-ZIP				CITY-S	1 · ZiP			
TITLE		□ DE		TIFLE		Change Additi	ion	
NAME STREET ADDRESS				NAME			}	
CITY-ST-ZIP					ADORESS	ESS		
	v certify that the information suppl	lied with this fiber is volu	6.4	CITY-S	T - ZIP			

I do nereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR