May 04, 1999 8:00 am Secretary of State

05-04-1999 90150 049 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F73070

CHERRY	' LAKE TREE FARM, INC.			
Principal Place	e of Business	Mailing Address		
7836 CHERRY LAKE RD 7836 CHERRY LAKE RD GROVELAND FL 34736 US US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  03/23/1982	
2 Dringing D	lace of Business	2a. Mailing Address	_	4. FEI Number Applied For
	lace of business	26		58-1477943 Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.		\$8.75 Additional
22	• •	27		5. Certificate of Status Desired Fee Required
City & State	9	City & State		6. Election Campaign Financing 5.00 May Be
23	•	28		Trust Fund Contribution Added to Fees
Zip	Country	Žip	Country	8. This corporation owes the current year Intangible
24	25	29	30	Personal Property Tax. Yes No
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered Agent
	Total State to		81 Name	le l
	RISON, GEORGE H		82 Stree	et Address (P.O. Box Number is Not Acceptable)
	MANATEE AVE WEST			
BRA	DENTON FL 33505		83	
,	•		84 City	FL 85 Zip Code
-3	m familiar with, and accept the obliga	uoris or, section cor.cocs, ric	nioa Glatutes.	
SIGNATURE	Signature, typed or printed name of registered ager OFFICERS AN	ID DIRECTORS	13.	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	Signature, typed or printed name of registered ager OFFICERS AN		13. 1.1 TITLE	is required within (virtuality)
12.	Signature, typed or printed name of registered ager OFFICERS AN P SALLIN, MICHEL	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	Signature, typed or printed name of registered ager OFFICERS AN P SALLIN, MICHEL 7836 CHERRY LAKE RD	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ager OFFICERS AN P SALLIN, MICHEL 7836 CHERRY LAKE RD GROVELAND FL	ID DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRES: 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
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14. 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 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, with all other like empowered.

6.4 C/TY-ST-Z/P

SIGNATURE:

Jr2-429 2171