

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G72465** (9)

1. Corporation Name

ADRIAN C. FLETCHER FARMS, INC.



Principal Place of Business

Mailing Address

GADSDEN COUNTY ROAD 379
PO BOX 70
GREENSBORO FL 32330

GADSDEN COUNTY ROAD 379
PO BOX 70
GREENSBORO FL 32330

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 County

29 Zip

30 County

3. Date Incorporated or Qualified
12/07/1983

3a. Date of Last Report
02/27/1995

4. FEI Number
59-2354576

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLETCHER, A. C.
GADSDEN COUNTY ROAD 379
POST OFFICE BOX 70
GREENSBORO FL 32330**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0812 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the corporation, if the corporation is a corporation, partnership, or limited liability company

Signature of the Agent, if the agent is a natural person

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME DELETE

13.1 TITLE Change Addition

NAME: **DP FLETCHER, ADRIAN C.
GADSDEN CO. RD. 379
GREENSBORO FL**

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

12.2 NAME DELETE

13.5 TITLE Change Addition

NAME: **VD FLETCHER, PATRICIA
5016 NW 36TH ST
GAINESVILLE, FL 00000**

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

12.3 NAME DELETE

13.9 TITLE Change Addition

NAME: **STD BRIDGES, JANET FLETCHER
GADSDEN CO. RD. 379
GREENSBORO FL**

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

12.4 NAME DELETE

13.13 TITLE Change Addition

NAME:

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

12.5 NAME DELETE

13.17 TITLE Change Addition

NAME:

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST, ZIP

12.6 NAME DELETE

13.21 TITLE Change Addition

NAME:

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, ST, ZIP

12.7 NAME DELETE

14. I do hereby 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: *Adrian C. Fletcher* **Adrian C. Fletcher** 1/18/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Official Phone #

CR2E034 (12/95)