


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # H92545
 1. Entity Name
UNCLE DONALD'S FARM, INC.



Principal Place of Business Mailing Address
 2713 GRIFFIN AVENUE P.O. BOX 87
 LADY LAKE, FL 32159 LADY LAKE, FL 32158

DO NOT WRITE IN THIS SPACE



04072006 No Chg-F CR2E034 (11/05)

4. FEI Number Applied For
 59-2617863 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MORRIS, JEANETTE E.
 2713 GRIFFIN AVENUE
 LADY LAKE, FL 32159

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MORRIS, DONNA
STREET ADDRESS	2713 GRIFFIN AVE
CITY-ST-ZIP	LADY LAKE, FL 32159
TITLE	DS
NAME	MORRIS, JEANETTE E
STREET ADDRESS	P.O. BOX 87, GRIFFIN AVE.
CITY-ST-ZIP	LADY LAKE, FL 32158
TITLE	DT
NAME	MORRIS, ELIZABETH
STREET ADDRESS	2713 GRIFFIN AVENUE
CITY-ST-ZIP	LADY LAKE, FL 32158
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000499125
 04/24/06-80016-015 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeanette E Morris Jeanette E Morris 4-7-06 352-253-2882
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #