

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.

AMOUNT DUE ON RECEIPT \$750.00 (IF FOREIGN) \$1,500.00 (IF FOREIGN) AMOUNT DUE TO REINSTATE \$750.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1995 APR 27 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J69916** (1)

1. Corporation Name
LUCAS FARM, INC.

Mailing Address: ~~1111 LINCOLN RD. MALL STE. 500 MIAMI BEACH FL 33139~~
18215 COLLINS AVE MIAMI BEACH FL 33160
Principal Place of Business: ~~1111 LINCOLN RD. MALL STE. 500 MIAMI BEACH FL 33139~~
18215 COLLINS AVE MIAMI BEACH FL 33160
If above addresses are incorrect in any way, line through incorrect information and enter correction below

DO NOT WRITE IN THIS SPACE

21. Mailing Address 18215 COLLINS AVE	26. Principal Place of Business 18215 COLLINS AVE
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State MIAMI BEACH FL	28. City & State MIAMI BEACH FL
24. Zip 33160	25. Country USA
29. Zip 33160	30. Country USA

3. Date Incorporated or Qualified 04/28/1987	3a. Date of Last Report 02/25/1993
4. FEI Number 65-0213107	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
~~MCKIBBIN, DAVID A.
THERREL BAIRDEN & MEYER WEISS
1111 LINCOLN RD. MALL STE. 500
MIAMI BEACH FL 33139~~

10. Name and Address of New Registered Agent
81 Name **F. W. LUCAS**
82 Street Address (P.O. Box Number is Not Acceptable)
18215 COLLINS AVE
83
84 City **MIAMI BEACH** FL 85 Zip Code **33160**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.
SIGNATURE: *Francis W. Lucas* DATE: **4-14-95**

12. OFFICERS AND DIRECTORS

1.1 TITLE D/P	1.2 NAME LUCAS, FRANCIS W.	1.3 STREET ADDRESS 18215 COLLINS AVENUE	1.4 CITY - ST - ZIP MIAMI BEACH FL
2.1 TITLE D	2.2 NAME LUCAS, RUTH K.	2.3 STREET ADDRESS 18215 COLLINS AVE.	2.4 CITY - ST - ZIP MIAMI BEACH FL
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP 33160
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP 33160
3.1 TITLE	3.2 NAME D. V. AND S ROBERT F. LUCAS	3.3 STREET ADDRESS 18215 COLLINS AVE	3.4 CITY - ST - ZIP MIAMI BEACH FL 33160
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS 600001466956	5.4 CITY - ST - ZIP -04/27/95--01068--015
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP ****200.00 ****200.00
7.1 TITLE	7.2 NAME	7.3 STREET ADDRESS	7.4 CITY - ST - ZIP
8.1 TITLE	8.2 NAME	8.3 STREET ADDRESS	8.4 CITY - ST - ZIP

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 1 (1) 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 executor or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.
SIGNATURE: *Francis W. Lucas* DATE: **4-14-95**
FRANCIS W LUCAS
PRES