

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

FILED

Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 429425

(2)

1. Corporation Name
HILLDALE FARMS OF FLA., INC.

Principal Place of Business
HIGHWAY 41 NORTH
P.O. BOX 2109
LAKE CITY FL 32056-1703
US

Mailing Address
P.O. BOX 2109
P.O. BOX 1703
LAKE CITY FL 32056-1703
US



2. Principal Place of Business

21 Suite, Apt #, etc:

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt #, etc:

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

06/28/1973

3a. Date of Last Report

04/09/1996

4. FEI Number

59-1477816

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

HAZEN, JACK E. JR.
US HWY 41 NORTH
LAKE CITY FL 32055

10. Name and Address of New Registered Agent

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 607.0502 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

Jack E. Hazen Jr.

(NOTE: Registered Agent signature required when reinstating)

1/17/97

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	HAZEN, JACK E.	
STREET ADDRESS	RT 2 BOX 3074	
CITY - ST - ZIP	STARKE FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	HAZEN, JACK E. JR	
STREET ADDRESS	US HWY 41 NORTH	
CITY - ST - ZIP	LAKE CITY FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HAMMOND, JOHN R.	
STREET ADDRESS	12207 WOOD DUCK PLACE	
CITY - ST - ZIP	TEMPLE TERRACE FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	WARD, JO N	
CITY - ST - ZIP	LAKE CITY FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BETHEL, ORLAND R.	
STREET ADDRESS	18 WAVERLY DRIVE	
CITY - ST - ZIP	GREENSBURG PA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HUNNICUTT, HOMER JR	
STREET ADDRESS	4004 RAINES ROAD	
CITY - ST - ZIP	BROOKSVILLE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE:

Jo N. Ward
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/97 (904) 755-1870

Date Daytime Phone #

CR2E034 (9/96)