


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # F98000003581 1. Entity Name ACRES WILD FARM, INC.		
Principal Place of Business 13833 WELLINGTON TRACE E-4 WELLINGTON, FL 33414	Mailing Address P.O. BOX 1688 PLAINVILLE, MA 02762	
<h2>DO NOT WRITE IN THIS SPACE</h2>		
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		
<h2>DO NOT WRITE IN THIS SPACE</h2>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCST VALLIERE, JILLUANN 108 HAWKINS STREET PLAINVILLE, MA 02762	
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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: <u>Jilluan Valliere</u> 1/18/06 561-719-8624 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>		



01192006 No Chg-P CR2E034 (11/05)

4. FEI Number 51-0356967	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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01/26/06 80006-017 150.00