

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 752670

**Entity Name:** ARAPAHOE FARMS, INC.**Current Principal Place of Business:**8751 W. BROWARD BLVD.  
400  
PLANTATION, FL 33324**Current Mailing Address:**P.O. BOX 19439  
PLANTATION, FL 33318 US**FEI Number:** 59-2191475**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALANCY, STEVEN S  
311 SE 13 STREET  
FORT LAUDERDALE, FL 33316 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIR/V PRES  
Name CORNBLATT, GAIL  
Address 3330 SW 59 ST  
City-State-Zip: HOLLYWOOD FL 33312

Title DIR, SECRETARY  
Name UNGAR, MIRIAM  
Address 5810 SW 33 TER  
City-State-Zip: FORT LAUDERDALE FL 33312

Title DIR/PRES  
Name COPLOWITZ, BARBARA  
Address 5901 SW 33 LANE  
City-State-Zip: HOLLYWOOD FL 33312

Title DIR/TREAS  
Name EVER, JUDAH H  
Address 3321 SW 59 STREET  
City-State-Zip: FT. LAUDERDALE FL 33312

Title DIRECTOR  
Name KRANT, ELIZABETH  
Address 5821 SW 33 TERRACE  
City-State-Zip: HOLLYWOOD FL 33312

Title DIR  
Name ZORMAN, GREG  
Address 5730 ARAPAHOE ROAD  
City-State-Zip: HOLLYWOOD FL 33312

Title DIR  
Name HOFFMAN, JAMES  
Address 5901 SW 33 TERRACE  
City-State-Zip: HOLLYWOOD FL 33312

Title DIR  
Name BEN-EZRA, MARC  
Address 5810 SW 33 LANE  
City-State-Zip: HOLLYWOOD FL 33312

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** COPLOWITZ , BARBARA

PRESIDENT

02/13/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

|                 |                    |
|-----------------|--------------------|
| Title           | DIRECTOR           |
| Name            | EISENMANN, MARC    |
| Address         | 3350 SW 57 PL      |
| City-State-Zip: | HOLLYWOOD FL 33312 |