

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 186236

**Entity Name:** WEDGWORTH FARMS INC**Current Principal Place of Business:**651 N.W. 9TH STREET  
BELLE GLADE, FL 33430**Current Mailing Address:**P.O. BOX 2076  
BELLE GLADE, FL 33430**FEI Number:** 59-0695314**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEDGWORTH, DENNIS G  
651 NW 9TH STREET  
BELLE GLADE, FL 33430 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 ST  
Name SUAREZ, JORGE AASST  
Address 13841 GERANIUM PLACE  
City-State-Zip: WELLINGTON FL 33414

Title STD  
Name OETZMAN, BARBARA A  
Address 1071 FAIRVIEW LANE  
City-State-Zip: RIVIERA BEACH FL 33404

Title DIRECTOR  
Name BOYNTON, BENJAMIN  
Address 1776 ARABIAN DRIVE  
City-State-Zip: LOXAHATCHEE FL 33470

Title VP  
Name STEIN, ROY STEWART  
Address PO BOX 878  
City-State-Zip: BELLE GLADE FL 33430

Title VD  
Name BOYNTON, WAYNE A  
Address PO BOX 1428  
City-State-Zip: LOXAHATCHEE FL 33470

Title COBD, PD  
Name WEDGWORTH, DENNIS G  
Address 13643 STAIMFORD DR  
City-State-Zip: WELLINGTON FL 33411

Title DIRECTOR  
Name ALTMAN, THOMAS  
Address 1000 NE 2ND STREET  
City-State-Zip: BELLE GLADE FL 33430

Title VP  
Name WEDGWORTH, DOUGLAS KEITH  
Address 1294 BRAMPTON COVE  
City-State-Zip: WELLINGTON FL 33414

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JORGE SUAREZ JR.ASST  
SECRETARY/TREASURER

01/15/2020

Electronic Signature of Signing Officer/Director Detail

Date