

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 459467

**FILED
Mar 18, 2017
Secretary of State
CC6679312964**

Entity Name: JESSAMINE FARM, INC.

Current Principal Place of Business:

16625 JESAMINE RD
DADE CITY, FL 33523

Current Mailing Address:

16625 JESAMINE RD
DADE CITY, FL 33523 US

FEI Number: 59-1551874

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLOMMEL, CHRISTOPHER JPRES
16625 JESSAMINE RD
DADE CITY, FL 33523 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 D
Name CHRISTIANSEN, JANICE
Address 16515 JESSAMINE RD
City-State-Zip: DADE CITY FL

Title V
Name JOHNSTON, ANDREA
Address 16515 JESSAMINE RD
City-State-Zip: DADE CITY FL 33523

Title P
Name BLOMMEL, CHRISTOPHER J
Address 36621 MISSOURI AVE.
City-State-Zip: DADE CITY FL 33523

Title S
Name BLOMMEL, CLAY
Address 14027 PARADISE LANE
City-State-Zip: DADE CITY FL 33525

Title T
Name BLOMMEL, MATTHEW J
Address 16525 JESSAMINE RD
City-State-Zip: DADE CITY FL 33523

Title D
Name BLOMMEL, LINDA S
Address 16625 JESSAMINE RD
City-State-Zip: DADE CITY FL 33523

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: LINDA BLOMMEL

DIRECTOR

03/18/2017

Electronic Signature of Signing Officer/Director Detail

Date