**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Feb 13, 2019**
**Secretary of State**
**5960605872CC**

DOCUMENT# L28282

**Entity Name:** FLORIDA BLUE FARMS, INC.

**Current Principal Place of Business:**

10072 NE HIGHWAY 301
WALDO, FL 32694

**Current Mailing Address:**

P.O. BOX 357862
GAINESVILLE, FL 32635

**FEI Number: 59-2974478**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEE, CARIDAD E.
10072 NE HIGHWAY 301
WALDO, FL 32694 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 | PDS | Title | VP |
| Name | LEE, CARIDAD E. | Name | LEE, BRITTANY H |
| Address | P.O. BOX 357862 | Address | P.O. BOX 357862 |
| City-State-Zip: | GAINESVILLE FL 32635 | City-State-Zip: | GAINESVILLE FL 32635 |

*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: CARIDAD E. LEE REGISTERED AGENT 02/13/2019

Electronic Signature of Signing Officer/Director Detail — Date