

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000087444

**Entity Name:** WOOLBRIGHT FARMERS MARKET, INC.

**FILED**  
**Apr 10, 2014**  
**Secretary of State**  
**CC7783726229**

**Current Principal Place of Business:**

WOOLBRIGHT FARMERS MARKET  
141 SW WOOLBRIGHT RD  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

WOOLBRIGHT FARMERS MARKET  
141 SW WOOLBRIGHT RD  
BOYNTON BEACH, FL 33435

**FEI Number: 54-2071951**

**Certificate of Status Desired: No**

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

BRICKEL, JILL H  
7900 GLADES ROAD  
SUITE 220  
BOCA RATON, FL 33434 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 P  
Name GOLDFINGER, HOWARD  
Address 3296 LAKEVIEW DR  
City-State-Zip: DELRAY BEACH FL 33445

Title V  
Name ANGEL-GOLDFINGER, MICHELLE  
Address 3296 LAKEVIEW DR  
City-State-Zip: DELRAY BEACH FL 33445

Title V  
Name GOLDFINGER, JESSE  
Address 8860 BRIARWOOD MEADOW LN  
City-State-Zip: BOYNTON BEACH FL 33473

*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: JESSE GOLDFINGER**

**V**

**04/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date