## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

**BOYNTON BEACH DAIRIES, INC.** 

**FILED** Apr 20 1998 8:00am Secretary of State



			•						
Principal Place	e of Business	Mailing Address				g tamita binte bibin deine Bibis biber beit	ILDII MEMER MINSI	afāti aisi	
2411 N.E. 541		2411 N.E. 54TH TRAIL							
OKEECHOBEE FL 34972 US		OKEECHOBEE FL 34972 US				DO NOT WRITE IN THIS SPACE			
••		••				3. Date Incorporated or Qualified			
						05/01/1961			
2. Principal Place of Business		2a. Mading Address				4. FEI Number			oplied For
21		Suite Ant # etc				¢0.75			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	□ <b>&gt;</b>		Additional equired
22 City & State		City & State				6. Election Campaign Financing			May Be
23		28				, , ,		Added 1	
Zip	Country	Zip	Countr	y		8. This corporation owes or has paid the current year Intangible			angible
24	25		30			Personal Property Tax due June 30. 🙀 Yes 🗌 No			
	9. Name and Address of Current	Registered Agent	81	<del></del>		10. Name and Address of New Regi	stered Ager	<u>+t</u>	
	UGLAS BURNHAM			"	lame				
	I N.E. 54TH TRAIL EECHOBEE FL 34972		82 Street A			ddress (P.O. Box Number is Not Acceptable)			
UN	ECONODEE PL 349/2		83	╁					
			84	C	City		FL 8	; Zip∃	Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the abov	e-na	amed corpo	ration submits this statement for the pur	nose of cha	nging it	s registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.									
SIGNATURE	and choops the congr.								
SIGNATIONE	Signature, typod or printed name of registered agen			ent si	gnature required	when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE			~~~
TITLE	D' Burnham, A.L.	☐ DELETE	1.1 TITLE				Ц	Change	☐ Addition
NAME	419 SE 8TH AVE		1.2 NAME						
STREET ADDRESS	OKEECHOBEE FL		1.3 STREE						
CITY-ST-ZIP TITLE	VS	DELETE	1.4 CITY - 1 2.1 TITLE	51.21	ır			Change	Addition
NAME	BURNHAM, RANDY		2.2 NAME						
STREET ADDRESS	419 SE 8TH AVE		2.3 STREET ADDRESS		DRESS				
CITY-ST-ZIP	OKEECHOBEE FL		2. 4 CITY -		1		. 5		
TITLE	U	DELETE	3.1 TITLE					Change	Addition
NAME	BURNHAM, WANDA		3.2 NAME						
STREET ADDRESS	419 SE 8TH AVE		3.3 STREE	T ADO	IRESS				
CITY-ST-ZIP	OKEECHOBEE FL		3.4. CITY-	S1-Z	P				
TITLE	PT PURE POUCLAS	☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME	BURNHAM, DOUGLAS		4. 2 NAME						
STREET ADDRESS	<b>2411</b> N.E 54TH TRAIL OKEECHOBEE FL		4.3 STREE						
CITY-ST-ZIP	ONECONOBEE FL	DELETE	4.4 CITY-3	ST - ZI	P			Chones	Addition
TITLE		☐ DECETE	5.1 TITLE					Change	
NAME OTDEET ADDRESS			5.2 NAME	፣ ልጥጥ	nocee				
STREET ADDRESS CITY-ST-ZIP			5.3 STREET 5.4 CHTY-S		ŀ	•			
TITLE		☐ DELETE	6.1 TITLE	ا2 - زر				Change	Addition
NAME			6.2 NAME				_	•	
STREET ADDRESS			6.3 STREET	i add	RESS				
CITY-ST-ZIP			6.4 CITY - S						
14. I hereby o	ertify that the information supplied wit	h this filing does not qualify fo	r the exemn	tion	stated in Se	ection 119.07(3)(i), Florida Statutes. I fu	rther certify	hat the	information
officer or o	dir <b>ect</b> or of the corporation or the recei	ver or trustee empower <b>ed</b> to e	urate and the execute this	at m rep	ny signature ort as requir	shall have the same legal effect as if med by Chapter 607, Florida Statutes; an	iade under o id that my na	iath; tha ame api	at I am <b>a</b> n pears in
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 in Block 12 or Block 13 if changed, or on an attachment with an address.									