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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 266112 (2)

1. Corporation Name
LUST FARMS, INCORPORATED

Principal Place of Business	Mailing Address
2771 LUST ROAD APOPKA FL 32703	2771 LUST ROAD APOPKA FL 32703

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/15/1963
3a. Date of Last Report: 05/31/1994
4. FEI Number: 59-0999682 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

LUST,GRANT R
2771 LUST RD
APOPKA FL 32703

10. Name and Address of New Registered Agent

81 Name: Robert C. Lust
82 Street Address (P.O. Box Number is Not Acceptable): 2771 Lust Road
83
84 City: Apopka FL 85 Zip Code: 32703

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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: Robert C. Lust Robert C. Lust, President 2/23/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	1.1 TITLE		☐ Change ☐ Addition
NAME	LUST, CALVIN H	1.2 NAME		
STREET ADDRESS	2771 LUST RD.	1.3 STREET ADDRESS		
CITY-ST-ZIP	APOPKA, FL 00000	1.4 CITY-ST-ZIP		
TITLE	PD	2.1 TITLE	President	☐ Change ☒ Addition
NAME	LUST, GRANT R	2.2 NAME	Robert C. Lust	
STREET ADDRESS	2771 LUST RD.	2.3 STREET ADDRESS	2771 Lust Road	
CITY-ST-ZIP	APOPKA, FL 00000	2.4 CITY-ST-ZIP	Apopka, FL 32703	
TITLE	STD	3.1 TITLE		☐ Change ☐ Addition
NAME	LUST, SUE E	3.2 NAME		
STREET ADDRESS	2771 LUST RD	3.3 STREET ADDRESS		
CITY-ST-ZIP	APOPKA, FL 00000	3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE	VP & CEO	☐ Change ☒ Addition
NAME		4.2 NAME	Grant R. Lust, Jr.	
STREET ADDRESS		4.3 STREET ADDRESS	2771 Lust Road	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Apopka, FL 32703	
TITLE		5.1 TITLE	VP	☐ Change ☒ Addition
NAME		5.2 NAME	Sandra J. Lust	
STREET ADDRESS		5.3 STREET ADDRESS	2771 Lust Road	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Apopka, FL 32703	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sue E. Lust Sue E. Lust, Secretary 2/8/95 407-886-3000
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0036603 CP