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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(1)

DOCUMENT # 276480

PINE RIDGE DAIRY, INC.

Secretary of State

FILED

Jun 04 1998 8:00am

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Principal Place of Business Mailing Address					T ANGLEM DENIT ENDITE MITTING BOTT BOTT MENT AND I	I ALBITA GERLI BIRIK ALBIT BIRIT 1881	
2 1/2 MILES W. FRUITLAND PARK ON 466A P O BOX 448 P.O. BOX 448 FRUITLAND PARK FL 347			731		DO NOT HIDITE IN I	THIS STACE	
FRUITLAND PARK FL 34731 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					12/13/1963		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21					59-1031349	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						CO 75	
27		27			5. Certificate of Status Desired	Fee Required	
	City & State City & State				6. Election Campaign Financing	\$5.00 May Be	
23	28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid th		
24	25 9. Name and Address of Cur	29	30		Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No	
.IC	FFCOAT, BERNICE W.	Tent negistered Agent	81	Name	10. Haile Bild Address of New Hegiste	ilen viðenr	
2 1/2 MILES W. FRUITLAND PK ON 466A			L				
FRUITLAND PARK FL 34731			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
****			83	i	The state of the s		
•			84	City		FL 85 Zip Code	
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							
Standard types or printed many of registered agent and title dupportable (NOTE Registered						NTE.	
12.	OFFICERS.	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TIFLE	JEFFCOAT, BERNICE		1.1 TITLE	İ		L Change L. Addition	
NAME	STATE LINEY 400 A		1.2 NAME	ŀ			
STREET ADDRESS	EDITITI AND DADY EL			T ADDRESS			
CITY-ST-ZIP TITLE	VD DELETE		1.4 CITY - 2.1 TITLE	S1-7IP		Change Addition	
NAME	OLIVER, EDWARD A	_ breite	2.2 NAME			CT Olidage CT Floriday	
STREET ADDRESS	630 PINE RIDGE DAIRY RO	DAD		1 ADDRESS			
CITY-ST-ZIP	FRUITLAND PARK FL		2. 4 CITY				
TITLE	DELETE		3.1 TITLE	U1 U1		Change Addition	
NAME	EASLEY, CADE		3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-	SI-ZIP			
TITLE			4.1 TITLE			☐ Change ☐ Addition	
NAME	BUCKLER, BRUCE		4 2 NAME			İ	
STREET ADDRESS	COLISTIANO DADE EL		4 3 STREE	T ADDRESS			
CITY-ST-ZIP			44 CITY-	ST-ZIP			
TITLE	1		5.1 THILE			Change Addition	
NAME			5 2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	ZIP DELETE		5.4 CITY-	ST-ZIP		Change Addition	
TITLE			6.1 TITLE 6.2 NAME			Change Changing	
NAME OTDEET ANNOESS							
STREET ADDRESS				I ADDRESS			
CITY-ST-ZIP	<u> </u>		6.4 CITY-	51 · ZIP	0.000 Tel 07/000 El 200 Oct. 11/1/00		

I hereby certify that the information supplied with this filing 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 supplienental 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.