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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90187 017 \*\*\*150.00

1. Corporation	MEN # 280611 D "D" FARMS, INC				
Principal Place	e of Business	Mailing Address			II SIDIS DIBNI DIDIS DIDNI SIDII IDDI
8620 85TH STREET 8620		8620 85TH STREET VERO BEACH FL <del>-22968 -</del>		DO NOT WRITE IN TH	IIS SPACE
		La BA-III - Address		04/20/1964 4. FEI Number	Asslied For
	lace of Business -	2a, Mailing Address		59-1088751	Applied For Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional
22	m, 010.	27		5. Certifcate of Status Desired	Fee Required
City & Stat	е	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24 32967		29 32967 30	USA	Personal Property Tax.	Yes 🗆 No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registere	nd Agent
MCHUGH, JOHN JOSEPH JR.					
333 17TH ST., SUITE U			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
VERO BEACH FL 32960			83		
TENO DESTOTTE GEORG			65		
	• '		84 City	F	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, am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PD	☐ DELETE	1,1 TITLE		Change
NAME	DAVIS,JACK L		1.2 NAME		,
STREET ADDRESS	8620 85TH STREET	. •	1.3 STREET ADORESS		
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP	32967	
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS	_	<b>~</b> .	2.3 STREET ADDRESS	and the second s	
, CITY-ST-ZIP			2.4 CITY-ST-ZIP		Character Maddition
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS	•		3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
TITLE			4. 2 NAME		
NAME STREET ADDRESS	<u>, .</u>		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	<u> </u>	☐ DELETE	5.1 TITLE		Change Addition
NAME	•		5.2 NAME		
STREET ADDRESS		,	5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition

14. 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 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, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20 99

Daytime Phone #

:R2E034 (11/98