FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

(5)

MOORE'S DAIRY FARM, INC.

Country

9. Name and Address of Current Registered Agent

25

Principal Place of Business 11313 UPPER MANATEE RIVER ROAD BRADENTON FL 34202-802

2. Principal Place of Business

MOORE, DUANE L.

BRADENTON FL 34202

RT. 2, BOX 314

Suite, Apt. #, etc.

City & State

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Zip

Mailing Address

2a. Mailing Address

City & State

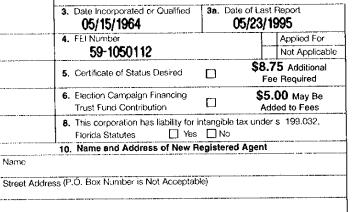
Suite, Apt. #, etc.

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11313 UPPER MANATEE RIVER ROAD BRADENTON FL 34202-802



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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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Country

81 Name

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84 City

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SIGNATURE _	Signature, typied or printed name of registered agent and	title if an elevable (NOT	E: Registered Agent signature recurred	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PVT	☐ DELETE	1. 1 TITLE	Change Addition
NAME	MOORE, DUANE L		1.2 NAME	
STREET ADDRESS	RT2, BOX 299-H		1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL		1.4 CITY - ST - ZIP	
TITLE		☐ DELETE	2. 1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2 3 STREET ADDRESS	
CITY-ST-ZIP			2 4 CITY - ST - 7IP	
TITLE		DELETE	3 1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3. STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY - ST - ZIP	
TITLE		DELÉTÉ	4. 1 1ITLE	Change Addition
NAME			4.2 NAME	•
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - S1 - ZIP	
TITLE		[] 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
NAME			6.2 NAME	
STREET ADDRESS	Ì		6 3 STREET ADDRESS	
			6.4 CiTV - ST - 7iP	

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)(k), 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 justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attackment with an address.

SIGNATURE:

5-16-96 (941) 746-0501

CR2E034 (12/95)