

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 296700

Entity Name: B & K FARMS, INC.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

4450 HAVANA HIGHWAY
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

4450 HAVANA HIGHWAY
HAVANA, FL 32333

New Mailing Address:

FEI Number: 59-1110443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTAGUE, WILLIAM L
4450 HAVANNA HWY
HAVANA, FL US

Name and Address of New Registered Agent:

MONTAGUE, WILLIAM L
4450 HAVANNA HWY
HAVANA, FL 32333 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

01/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONTAGUE, WILLIAM L,
Address: 4450 HAVANA HWY
City-St-Zip: HAVANA, FL

Title: DST () Delete
Name: MONTAGUE, SARAH K,
Address: 4450 HAVANA HWY
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: CROLEY, DIANNE M
Address: 255 LONGVIEW LN
City-St-Zip: HAVANA, FL 32333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MONTAGUE, WILLIAM L,
Address: 4450 HAVANA HWY
City-St-Zip: HAVANA, FL 32333 US

Title: DST (X) Change () Addition
Name: MONTAGUE, SARAH K,
Address: 4450 HAVANA HWY
City-St-Zip: HAVANA, FL 32333 US

Title: D (X) Change () Addition
Name: CROLEY, DIANNE M
Address: 255 LONGVIEW LN
City-St-Zip: HAVANA, FL 32333 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SARAH K. MONTAGUE

DST

01/08/2009

Electronic Signature of Signing Officer or Director

Date