

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90028 003 ***150.00

DOCUMENT # 300181

1. Entity Name

THE V.V. VOGEL AND SONS FARMS, INC.



Principal Place of Business
13013 VOGEL FARMS RD
GIBSONTON FL 33534
US

Mailing Address
P.O. BOX 638
13013 VOGEL FARMS RD.
GIBSONTON FL 33534
US



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-1115063

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GEORGE, VOGEL H
13013 VOGEL FARMS ROAD
GIBSONTON FL 33534

7. Name and Address of New Registered Agent

Name George H. Vogel

Street Address (P.O. Box Number is Not Acceptable)

11535 Corwin St

City Gibsonton

FL

Zip Code 33534

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

George H. Vogel

Signature typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

Jan 22 2004

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	VOGEL, GEORGE	
STREET ADDRESS	13013 VOGEL FARMS RD	
CITY-ST-ZIP	GIBSONTON FL 33534	
TITLE	DST	<input checked="" type="checkbox"/> Delete
NAME	VOGEL, GEORGE H. JR.	
STREET ADDRESS	13013 VOGEL FARMS RD	
CITY-ST-ZIP	GIBSONTON FL 33534	
TITLE	VD	<input type="checkbox"/> Delete
NAME	VOGEL, JOHN V.	
STREET ADDRESS	12014 S. NORTH ST.	
CITY-ST-ZIP	GIBSONTON FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vogel, George H	
STREET ADDRESS	11535 Corwin St	
CITY-ST-ZIP	Gibsonton FL 33534	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George H. Vogel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 22 2004

Date

813-677-5487

Daytime Phone #