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

**PROFIT** CORPORATION ANNÜAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of sale DIVISION OF CORPORATIONS

1997

DOCUMENT # 300258

(1)

MILKY WAY FARMS, INC.

	Business

Mailing Address

		FILEI	)
Apr	15	1997	8:00am
Se	cre	tary o	f State



12211 UPPER MANATEE RIVER RD. BRADENTON FL 34202		12211 UPPER MANATEE RIVER RD. Bradenton FL 34202-9147				
i 					3. Date incorporated or Qualified 12/29/1965	3a. Date of Last Report 05/01/1996
2. Principal f	Place of Business	2a. Mailing Address	<del></del>		4. FEI Number	Applied For
21		26			59-1123532	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		·····	6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Country	/	6. This corporation has liability for i	ntangible tax under s. 199.032,
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of Cur	rent Registered Agent		<b>,</b> -	10. Name and Address of New Re	gistered Agent
REA	AGAN, CECIL L.		81	Name		
122	11 UPPER MANATEE RIVER R	D.	82	Street Ade	dress (P.O. Box Number is Not Acceptab	la)
	DENTON FL 34202		83		areas (1.10. Dox riambar is riac riac plas	
	f		63			
			84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statu	ites, the abov	e-named co	rporation submits this statement for the p	urpose of changing its registered
office or agent. La	registered agent, or both, in the St am familiar with, and accept the ob	tate of Florida. Such change was pligations of, Section 607.0505, F	authorizea b Iorida Statute	y tne corpor s.	ation's board of directors. I hereby accep	ot the appointment as registered
SIGNATURE	Ceril &	PARM			stril 7-1	195 <b>5</b>
SIGNATURE	Styriature Typed or printed han e of registered	lagent and title if policable. (NC	TE Registered Ag	ent signature req	ulted when reinstating)	DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	☐ DELETE	1.1 TITLE			Change Addition
NAME	REAGAN, CECIL L.		12 NAME			
STREET ADDRESS	12211 UPR MANATEE RVR	RD	1.3 STREE	T ADDRESS		
C41Y - ST - 7IP	BRADENTON FL		1.4 CITY-	ST-ZIP		
TIFLE	VD .	DELETE	2.1 TITLE		1 / 1/ 1/	Change Addition
NAME	GRIFFIN, KENNETH H.		2.2 NAME		Connect III	f-
STREET ADDRESS	12455 UPR MANATEE RVR	RD	2.3 STREE	T ADDRESS	Kenne / / Di	•
CRY+SI+ZiP	BRADENTON FL		2 4 CITY-	ST-ZIP		
TITLE	S	☐ DELETE	3.1 TITLE			Change Addition
NAME	REAGAN, BETTY SUE		3.2 NAME		$\Omega$ $I$ $\Omega$	/
STREET ADDRESS		RD	3.3 STREE	T ADDRESS	K. Du H	
CHY-\$1-7/P	BRADENTON FL		3.4. CITY-	ST-ZIP X	July XXV X La	yar-
TITLE	AV	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	REAGAN, T.W.		4. 2 NAME			
STREET ADDRESS	1		4.3 STREE	T ADDRESS		
CITY-ST-ZIP	MCALPIN FL		4.4 CITY-	ST-ZIP		
THTLE	AV	DELETE	5.1 TITLE			Change  Addition
NAME	LOWE, C.W.		5.2 NAME			
STREET ADDRESS	RT. 1, BOX 603-2		5.3 STREE	T ADDRESS		
City-St-ZiP	MCALPIN FL		5.4 CITY-	ST-ZIP		<i>a</i>
TITLE	AV	DELETE	6.1 TITLE		0151 6	☐ Change ☐ Addition
NAMÉ	REAGAN, PAUL DEAN		6.2 NAME		foul Vice Me	wy - ye
STREET ADDRESS	14204 UPR MANATEE RUV	RD	6.3 STREE	T ADDRESS		
CITY-ST-ZIF	BRADENTON FL		6.4 CITY -	מול _ דם		

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR