

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90350 033 ***150.00

DOCUMENT # 324395

1. Entity Name
SCHWARTZ FARMS, INC.



Principal Place of Business
**13011 FRUITVILLE RD.
SARASOTA, FL 34240**

Mailing Address
**13011 FRUITVILLE RD.
SARASOTA, FL 34240**

40042292



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03212006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number
59-1200136

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHWARTZ, DAVID
13111 FRUITVILLE RD.
SARASOTA, FL 34240**

Name
SCHWARTZ, MICHAEL D.
Street Address (P.O. Box Number is Not Acceptable)

13211 FRUITVILLE RD.

City **SARASOTA** **FL** **34240**

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

MICHAEL D. SCHWARTZ, PD/T

3-27-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

T
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SCHWARTZ, MICHAEL
13211 FRUITVILLE ROAD
SARASOTA, FL 34240** ☐ Delete

PD/T
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SCHWARTZ, MICHAEL D.
13211 FRUITVILLE RD.
SARASOTA, FL 34240** ☒ Change ☐ Addition

PD
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SCHWARTZ, DAVID
13211 FRUITVILLE ROAD
SARASOTA, FL 34240** ☒ Delete

☐ Change ☐ Addition

S
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MILLER, JANET L
13211 FRUITVILLE ROAD
SARASOTA, FL 34240** ☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

MICHAEL D. SCHWARTZ, PD/T 3-27-06 (941)371-8998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #