## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 337958** 

FILED Jan 04, 2008 Secretary of State

Entity Name: HOMESTEAD POLE BEAN COOPERATIVE, INC.

Current Principal Place of Business:				New Principal Place of Business:			
26000 SOUTH FEDERAL HWY P.O. BOX 322248 HOMESTEAD, FL 33032 US			:	26000 SOUTH FEDERAL HWY HOMESTEAD, FL 33032 US			
Current Mailing Address:				New Mailing Address:			
PO BOX 322248 HOMESTEAD, FL 330321548 US							
FEI Number: 59-1234713 FEI Number Applied For ( ) FEI Number				nber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
BOREK, THOMAS 26000 S. DIXIE HIGHWAY HOMESTEAD, FL 33032 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:							
	Electronic	c Signature of Registered Agent	t			Date	
Election Campaign Financing Trust Fund Contribution ( ).							
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES						S TO OFFICERS AND DIREC	TORS:
Title: Name: Address: City-St-Zip:	D () I BOREK, RICHAR 11490 SW 238 T PRINCETON, FL	ERR	1	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () I DUNAGAN, LARF 14975 SW 232N GOULDS, FL 33	DST	1	Title: Name: Address: City-St-Zip:	,	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T () EBOREK, JOSEPH 600 N.E. 14TH S HOMESTEAD, FI	т.	1	Title: Name: Address: City-St-Zip:	•	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	S ()[FISHMAN, YALE 13661 DEERING MIAMI, FL 3315	BAY DRIVE	1	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () E HEDIGER, WAYI 24155 S.W. 152I HOMESTEAD, FI	ND AVENUE	1	Title: Name: Address: City-St-Zip:	1	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	D () EBOREK, STEVEN 12110 SW 248 S PRINCETON, FL	STREET	1	Title: Name: Address: City-St-Zip:	GUTIERREZ,	03 TERRACE	
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: THOMAS BOREK P 01/04/2008