

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 347439

FILED
Jan 27, 2009
Secretary of State

Entity Name: HUNDLEY FARMS, INC.

Current Principal Place of Business:

25849 SR 880
BELLE GLADE, FL 33430 US

New Principal Place of Business:

25849 CR 880
BELLE GLADE, FL 33430 US

Current Mailing Address:

PO BOX H
P.O. DRAWER H
LOXAHATCHEE, FL 33470 US

New Mailing Address:

FEI Number: 59-1265209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNDLEY, JOHN L
1440 HARBOUR POINT DR.
N. PALM BCH, FL 33410 US

Name and Address of New Registered Agent:

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 Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HUNDLEY, JOHN L,
Address: 1440 HARBOUR POINT DR.
City-St-Zip: N. PALM BCH, FL 33410

Title: VP () Delete
Name: HUNDLEY, JOHN S.,
Address: 751 PINE CHASE COURT
City-St-Zip: WELLINGTON, FL 33414

Title: STD () Delete
Name: HUNDLEY, PATRICIA K.,
Address: 1440 HARBOUR POINT DR.
City-St-Zip: N. PALM BCH, FL 33410

Title: VF () Delete
Name: HOPKINS, KRISTA HUNDLEY
Address: 2635 SUN COVE LANE
City-St-Zip: NORTH PALM BEACH, FL 33410

Title: VB () Delete
Name: HOPKINS, WILLIAM E
Address: 2635 SUN COVE LANE
City-St-Zip: NORTH PALM BEACH, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN L. HUNDLEY

PD

01/27/2009

Electronic Signature of Signing Officer or Director

Date