	PROFIT PPORATION	FLORIDA DEI	PARIMENT OF STATE		LED 998 8:00an
ANNUAL REPORT		Secr	etary of State	Apr 14 1998 8:00am Secretary of State	
DOCU 1. Corporatio	<b>1998</b> MENT # 359929 R DAIRY, INC.	····			ay of State
Principal Place of Businoss     Mailing Address       2807 GERBER DAIRY ROAD     2607 GERBER DAIRY ROAD       WINTER HAVEN FL 33880     WINTER HAVEN FL 33880				DO NOT WRITE I	
				<ol> <li>Date Incorporated or Qualified 02/19/1970</li> </ol>	₩
, Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		59-1293385	Not Applicable
City & State	e	27 City & State		5. Certificate of Status Desired     6. Election Campaign Financing	Fee Required
7		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	<ol> <li>This corporation owes or has paid Personal Property Tax due June 3</li> </ol>	30. 📝 Yes 🔛 No
<u>ÀE</u> I	9. Name and Address of Curren RBER, DANIEL S	t Registered Agent	81 Name	10. Name and Address of New Reg	Istered Agent
	7 GERBER DAIRY ROAD		82 Street Add	ress (P.O. Box Number is Not Acceptable	3)
WIN	NTER HAVEN FL 33880		83		
			84 City		85 Zip Code
1 Durauant		0			
IGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblige Stignature typed or privited name of registered agen		is authorized by the corpora Florida Statutes. 2011 : Registered Agent signature requi	coration submits this statement for the pu lion's board of directors. I hereby accept	DA74
2 <u>.</u>	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
le Me Reet address Y • St - Zip	PD Gerber,d S 2607 Gerber Dairy Road Winter Haven Fl	LJ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	;-	Change Addition
.E	VP	DELETE	1.4 CITY - ST- ZIP 2.1 TITLE		Change 🔲 Addition
AE EET ADDRESS	Gerber, juliette 2607 Gerber Dairy Road		2.2 NAME		
-ST-ZIP	WINTER HAVEN FL		2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		
E	D	DELETE	3 1 TITLE		Change Addition
ne Eet address	Gerber, William J. 2607 Gerber Dairy Road		3.2 NAME 3.3 STREET ADDRESS		
r-St-ZIP E	WINTER HAVEN FL		3.4. CITY-ST-ZIP		
t i IE		L_] DELETE	4.1 TITLE 4. 2 NAME		Change Addition
EET ADDRESS			4.3 STREET ADDRESS		
•ST-ZIP		DLLETE	4.4 CITY-ST-ZIP		
E			5.1 TITLE 52 NAME		Change 🛄 Addition
ET ADDRESS			5.3 STREET ADDRESS		
- ST- ZIP			5.4 CITY-ST-ZIP		
E		🔲 DELETÉ	6.1 TITLE 6.2 NAME		L Change L Addition
EET ADDRESS			6.3 STREET ADDRESS		
-st-zip	a the shall shall be to form a training of the state		6.4 CITY-ST-ZIP		
indicated of officer or d	erry that the information supplied will on this annual report or supplemental lirector of the corporation or the recei in Block 13 if changed or on an attact	in one ming does not qualify annual report is true and a ver or trustee empowered t broent with an address	r for the exemplion stated in courate and that my signature o execute this report as requ	Section 119.07(3)(i), Florida Statules. I fui re shall have the same legal effect as if m jired by Chapter 607, Florida Statutes; an	rther certify that the information lade under oath; that I am an Id that my name appears in