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FILED

Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 418696

(1)

1. Corporation Name

~~BRONSON FARMS, INC.~~

Hillandale Farms, Inc.

Principal Place of Business

HWY 41 NO.
PO BOX 2109
LAKE CITY FL 32056-2109

Mailing Address

P.O. BOX 2109
LAKE CITY FL 32056-2109
US

3. Date Incorporated or Qualified

02/02/1973

3a. Date of Last Report

04/10/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-1439919

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

HAZEN, JACK E JR.
US HWY 41 NORTH
LAKE CITY FL 32055

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Jack E. Hazen Jr.

1/17/97

(Signature typed or printed here, and not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
CD	HAZEN, JACK E	RT 2 BOX 3074	STARKE FL 32091	<input type="checkbox"/>
PD	HAZEN, JACK E JR	US HWY 41 NORTH	LAKE CITY FL 32055	<input type="checkbox"/>
V	HAMMOND, JOHN R	12207 WOOD DUCK PLACE	TEMPLE TERRACE FL 33617	<input type="checkbox"/>
ST	WARD, JO N	SPRING HOLLOW BLVD	LAKE CITY FL 32055	<input type="checkbox"/>
D	BETHEL, ORLAND R	18 WAVERLY DRIVE	GREENSBURG PA 15601	<input type="checkbox"/>
D	MIZELL, DORMAN W	HODGES ROAD	CALLAHAN FL 32011	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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:

John Ward

(Signature typed or printed here, and not applicable)

1/17/97 (904) 755-1870

DATE

Daytime Phone #

CR2E034 (9/96)