

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 429137

FILED
Feb 20, 2009
Secretary of State

Entity Name: HOLLENBERG FARMS, INC.

Current Principal Place of Business:

320 HOLLENBERG ROAD
SEBRING, FL 33872 US

New Principal Place of Business:

320 HOLLENBERG ROAD
SEBRING, FL 33975 US

Current Mailing Address:

3425 SPARTA ROAD
SEBRING, FL 338755359 US

New Mailing Address:

FEI Number: 59-1467367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUTKOSKY, EDNA
3425 SPARTA RD
SEBRING, FL 33875 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: DS () Delete
Name: HOLLENBERG, J RALPH,
Address: 3651 UNITED STATES HIGHWAY 27 SOUTH #588
City-St-Zip: SEBRING, FL 338705471

Title: DVP () Delete
Name: SWANK, VIOLA E.,
Address: 5040 OAK CIRCLE
City-St-Zip: SEBRING, FL 33875

Title: DP () Delete
Name: RUTKOSKY, EDNA M,
Address: 3425 SPARTA ROAD
City-St-Zip: SEBRING, FL 338755359

Title: DAVP () Delete
Name: LIGHT, DOROTHY F.
Address: 3898 PAWNEE STREET
City-St-Zip: COLUMBIA, PA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: HOLLENBERG, J RALPH,
Address: 9103 ILLINOIS CIRCLE
City-St-Zip: SEBRING, FL 338705139

Title: DVP (X) Change () Addition
Name: SWANK, VIOLA E.,
Address: 5072 OAK CIRCLE
City-St-Zip: SEBRING, FL 33875

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

Title: DAVP (X) Change () Addition
Name: LIGHT, DOROTHY J
Address: 3898 PAWNEE STREET
City-St-Zip: COLUMBIA, PA 175129742

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: EDNA RUTKOSKY

_____ Electronic Signature of Signing Officer or Director

DP

02/20/2009

_____ Date