## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

JON. Ward

## **Secretary of State DOCUMENT # 429425** 1. Entity Name 01-28-2005 90019 025 \*\*\*150.00 HILLANDALE FARMS OF FLA., INC. Principal Place of Business Mailing Address HIGHWAY 41 NORTH P.O. BOX 2109 P.O. BOX 2109 LAKE CITY, FL 32056-2109 US LAKE CITY, FL 32056-1703 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 Chg-P CR2E034 (10/03) City & State 4. FEI Number City & State Applied For 59-1477816 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Hazen Sr. HAZEN: JACK E. JR. O. Box Number is Not Acceptable) GIN US HWY 41 NORTH LAKE CITY, FL 32055 8. The above named entity submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. JACK Hazen Signature, typed or printed name of registered agont and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE President ☐ Delete TITLE ☐ Addition NAME HAZEN, JACK E. Jack E Hazen PRESS 13055 SW 1754 Que STREET ADDRESS RT 2 BOX 3074 STREET ADDRESS CITY-ST-ZIP STARKE, FL CITY-SI-ZIP Brooker FL 32622 IIILE Director NAME Jack E. Hazen, Jr SIRETADDRESS 123 Harmony Rd. TITLE PD ☐ Delete 19 Change Addition NAME HAZEN, JACK E. JR STREET ADDRESS **US HWY 41 NORTH** CITY-ST-ZIP LAKE CITY, FL CITY-ST-ZIP olumbia MS 39429 TITLE ☐ Delete TITLE ☐ Change ☐ Addition HUNNICUTT, HOMER E JR NAME NAME STREET ADDRESS 4004 RAINES RD STREET ADDRESS CITY-ST-ZIP BROOKSVILLE, FL 34604 CITY-ST-ZIP TRLE ST ☐ Delete TITLE ☐ Change ☐ Addition WARD, JO N NAME NAME STREET ADDRESS SPRING HOLLOW BLVD STREET ADDRESS CITY-ST-ZIP LAKE CITY, FL CITY+ST-7P TITSE ☐ Delete TITLE Change : ☐ Addition NAME BETHEL, ORLAND R. NAME Orland Bethel STREET ADDRESS 7196 Hawksview Trail STREET ADDRESS 16 WAVERLY DRIVE CHY-ST-ZIP GREENSBURG, PA CITY-ST-ZIP P TITLE Delete ☐ Change Addition HUNNICUTT; HOMER JR NAME NAME W. Dorman Mizell 4004 RAINES ROAD STREET ADDRESS STREET ADDRESS 5041 Dorman Place BROOKSVILLE, FL Callahan, FL 32011 12. I 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 report or supplemental 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 10 or Block 11 if changed; or on an attachment with an address; with all other like empowered. NTED NAME OF SIGNAL 1/24/05 SIGNATURE:

FILED

Jan 28, 2005 8:00 am