

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90031 026 ***150.00

DOCUMENT # 454266

1. Entity Name

RAVENSWORTH FARMS, INC.



DO NOT WRITE IN THIS SPACE

40015600

2. Principal Place of Business

408 E. CAMPHOR ST

Suite, Apt. #, etc.

3. Mailing Address C/O DALTON

P.O. Box 6740

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

AVON PARK, FL

City & State

OCALA, FL

4. FEI Number

59-1533771

Applied For

Not Applicable

Zip

33825

Country

USA

Zip

34478

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

D. PATRICK DALTON

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

408 E. CAMPHOR ST

City

AVON PARK

FL

Zip Code

33825

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES/DIR
D. PATRICK DALTON
408 E. CAMPHOR ST
AVON PARK, FL 33825

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE PRES/DIR
THOMAS R. DALTON
200 N. CORNELL AVE
FULTON, CA. 92831

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SEC/DIR
TERESA D. BRAGG
5617 NW 25TH AVE
LAKESIDE, FL 32658

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ASST SEC/DIR
NANCY D. HALL
4515 RAVENSWORTH RD
ANNANDALE, VA 22003

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREAS/DIR
JOSEPH M. DALTON
3373 AMERICAN SADDLER DR
PARK CITY, UT 84060

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
D. PATRICK DALTON, PRES

FEB 7, 2005

Date

352-341-7001

Daytime Phone #

CR2E034B (12/02)