

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 497710

FILED  
Feb 24, 2003  
Secretary of State

Entity Name: NOBLES FARMS, INC.

## Current Principal Place of Business:

P.O. DRAWER 2310  
LABELLE, FL 33935

## New Principal Place of Business:

450 SOUTH MAIN STREET  
SUITE 2  
LABELLE, FL 33935 US

## Current Mailing Address:

P.O. DRAWER 2310  
LABELLE, FL 33935

## New Mailing Address:

P.O. DRAWER 2310  
LABELLE, FL 339752310 US

FEI Number: 59-1797340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOBLES JR., LEWIS J.  
450 S MAIN STREET  
LABELLE, FL 33935 US

## Name and Address of New Registered Agent:

NOBLES, LEWIS J JR  
620 FORT THOMPSON AVE.  
LABELLE, FL 33935 US

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: LEWIS J NOBLES JR

02/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NOBLES JR., LEWIS J.,  
Address: 212 JEROME ST.  
City-St-Zip: IMMOKALEE, FL

Title: S ( ) Delete  
Name: NOBLES, GERALDINE B.,  
Address: 620 FT. THOMPSON AVE.  
City-St-Zip: LABELLE, FL

Title: V ( ) Delete  
Name: NOBLES III., L.J.,  
Address: FT. THOMPSON AVE.  
City-St-Zip: LABELLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NOBLES, LEWIS J JR  
Address: 620 FORT THOMPSON AVE.  
City-St-Zip: LABELLE, FL 33935 US

Title: S (X) Change ( ) Addition  
Name: MURRAH, G D  
Address: 700 FORT THOMPSON AVE.  
City-St-Zip: LABELLE, FL 33935 US

Title: VP (X) Change ( ) Addition  
Name: NOBLES, LEWIS J III  
Address: 598 FORT THOMPSON AVE.  
City-St-Zip: LABELLE, FL 33935 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEWIS J NOBLES JR

PD

02/24/2003

Electronic Signature of Signing Officer or Director

Date