

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008 08:00 A
Secretary of State

DOCUMENT # 558762

1. Entity Name
PINEHURST FARMS CORPORATION



Principal Place of Business
**1882 TURNBERRY TERR
 ORLANDO, FL 32804-6013**

Mailing Address
**1882 TURNBERRY TERR
 ORLANDO, FL 32804-6013**



01052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1799048	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ROGERS, JOHN W
 304 E COLONIAL DRIVE
 ORLANDO, FL 32801**

**DO NOT WRITE
 IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD	GORDON, WILLIAM R
NAME	1882 TURNBERRY TERRACE
STREET ADDRESS	ORLANDO, FL 00000,
CITY-ST-ZIP	
TITLE VPD	GORDON, WILLIAM R II
NAME	596 WATERSCAPE WAY
STREET ADDRESS	ORLANDO, FL 32828
CITY-ST-ZIP	
TITLE STD	GORDON, PATRICIA L
NAME	596 WATERSCAPE WAY
STREET ADDRESS	ORLANDO, FL 32828
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 01/09/08-80015-013 150.00

**DO NOT WRITE
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: William R Gordon William R Gordon 01/04/08 407-422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #