2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 09, 2005 08:00 AM Secretary of State **DOCUMENT #616209** 1. Entity Name ADAMS FARMS, INC. Principal Place of Business Mailing Address 751 OTTERPONDED 📑 751 OTTERPONDED WESTVILLE FL 32464-9317 US WESTVILLE, FL 32464-9317 US CR2E034 (10/03) 02232005 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1957800 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ADAMS, LEONARD D DO NOT WRITE 2575 HIGHWAY 185 DEFUNIAK SPRINGS, FL 32433 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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 OFFICERS AND DIRECTORS 10. D TITLE ADAMS, DEWITT NAME RT. 2, BOX 375 STREET ADDRESS U00000295819 04/09/05-80041-021 150.00 WESTVILLE, FL CITY-ST-ZIP TITLE NAME ADAMS, DAVID STREET ADDRESS **RT 3 BOX 253** CITY-ST-ZIP DEFUNIAK SPRINGS, FL PSD TITLE ADAMS, LEONARD NAME STREET ADDRESS RT 3 BOX 254-A DO NOT WRITE CITY-ST-ZIP DEFUNIAK SPRINGS, FL TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 fike empowered.

SIGNATURE: OCOMPAN & Colom

D. Colom Leonard D. Adams

850/859-2346

FILED