

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 688094

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** HINTON FARMS PRODUCE, INC.

**Current Principal Place of Business:**

1839 N. DOVER RD.  
DOVER, FL 33527 US

**New Principal Place of Business:**

**Current Mailing Address:**

1839 N. DOVER RD.  
DOVER, FL 33527 US

**New Mailing Address:**

**FEI Number:** 59-2069693

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HINTON, ROBERT M.  
1839 N DOVER RD  
DOVER, FL 33527 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HINTON, WYLIE  
Address: 1839 N. DOVER RD.  
City-St-Zip: DOVER, FL 33527

Title: SD  
Name: HINTON, ROBERT  
Address: 1839 N. DOVER RD.  
City-St-Zip: DOVER, FL 33527

Title: VTD  
Name: HINTON, GARY  
Address: 1839 N. DOVER RD.  
City-St-Zip: DOVER, FL 33527

I hereby 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 all other like empowered.

SIGNATURE: ROBERT M. HINTON

SD

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date