

# 2001 UNIFORM BUSINESS REPORT (UBR)

0013314 AF

DOCUMENT # **A04788**

1. Entity Name

715 FARMS, LTD.

**FILED**

01 JAN 25 AM 11:28

Principal Place of Business

155 BACOM POINT RD  
PAHOKEE FL 33476

Mailing Address

P.O. BOX 579  
PAHOKEE FL 33476

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-0923976

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NOWICKI, MARK J ESQUIRE  
14155 U.S. HIGHWAY ONE, SUITE 302  
JUNO BEACH FL 33408

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

\$3,162,614.21

10. Amount of Capital Contributions  
in FLORIDA to date.

3,162,614.21

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # 345638  
NAME LLOYD HUNDLEY, INC.  
STREET ADDRESS 155 BACOM POINT RD  
CITY-ST-ZIP PAHOKEE FL 33476

STREET ADDRESS

CITY-ST-ZIP

000003602850--4  
-01/30/01--01131--008  
\*\*\*\*\*535.00 \*\*\*\*\*535.00

DOCUMENT # 167630  
NAME LEWIS FRIEND FARMS INC.  
STREET ADDRESS 410 STATE MARKET ROAD  
CITY-ST-ZIP PAHOKEE FL 33476

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME APELGREN, ROBERT TRUSTEE  
STREET ADDRESS 800 MCCLURE ROAD  
CITY-ST-ZIP PAHOKEE FL 33476

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

LEWIS FRIEND FARMS, INC.

SIGNATURE:

BY: *Signature* **REQUIRED**

01/17/01

561-924-5651

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)