

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F60901

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Entity Name:** BELLEVUE GARDENS ORGANIC FARM, INC.

**Current Principal Place of Business:**

13109 SW 121ST AVENUE  
ARCHER, FL 32618 US

**New Principal Place of Business:**

**Current Mailing Address:**

13109 SW 121ST AVENUE  
ARCHER, FL 32618 US

**New Mailing Address:**

**FEI Number:** 59-2146925

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCPHERSON, LOIS M STD  
13109 SW 121ST AVENUE  
ARCHER, FL 32618 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: STD  
Name: MCPHERSON, LOIS M  
Address: 13109 SW 121ST AVENUE  
City-St-Zip: ARCHER, FL 32618

Title: PD  
Name: SIMMONS, THOMAS E JR  
Address: 13109 SW 121ST AVENUE  
City-St-Zip: ARCHER, FL 32618

Title: D  
Name: MESH, MARTIN  
Address: P.O. BOX 12345, NA  
City-St-Zip: GAINESVILLE, FL

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: LOIS M MCPHERSON

STD

03/03/2011

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

\_\_\_\_\_  
Date