

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 19, 2005 8:00 am**  
**Secretary of State**

04-19-2005 90376 048 \*\*\*150.00

**DOCUMENT # F79318**

1. Entity Name  
**ADRIENNE SUGARCANE FARM, INC.**



Principal Place of Business  
**ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH, FL 33401**

Mailing Address  
**ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH, FL 33401**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02112005 Chg-P CR2E034 (10/03)

4. FEI Number  
**59-2201750**

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

**TABERNILLA, ARMANDO A  
ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH, FL 33401**

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. 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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DP  
RECIO, ALBERTO S  
ONE NORTH CLEMATIS ST STE 200  
WEST PALM BEACH, FL 33401** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VAS  
ROSS, DANIEL D  
ONE NORTH CLEMATIS ST STE 200  
WEST PALM BEACH, FL 33401** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
RYAN, ALLAN A IV  
ONE NORTH CLEMATIS ST STE 200  
WEST PALM BEACH, FL 33401** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VAS  
TARR, WILLIAM F ESQ  
ONE NORTH CLEMATIS ST STE 200  
WEST PALM BEACH, FL 33401** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DVAS  
CARSON, DONALD W  
ONE NORTH CLEMATIS ST STE 200  
WEST PALM BEACH, FL 33401** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DEV** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VT  
BLOMQUIST, ERIK J  
ONE NORTH CLEMATIS ST STE 200  
WEST PALM BEACH, FL 33401** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

(CONTINUED)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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. (CONTINUED)

**SIGNATURE:** *Armando A. Tabernilla* **Armando A. Tabernilla, VP** **2/15/05** **561-655-6303**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

# ATTACHMENT

40061402

|                                                          |        |
|----------------------------------------------------------|--------|
| ATTACHMENT TO<br>2005 ANNUAL REPORT                      |        |
| DOCUMENT #                                               | F79318 |
| 1. Corporation Name<br><br>ADRIENNE SUGARCANE FARM, INC. |        |

| - CONTINUED    |                                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |
|----------------|-----------------------------------|---------------------------------------------|
| TITLE          | D/V/S                             |                                             |
| NAME           | Tabernilla, Armando A.            |                                             |
| STREET ADDRESS | One North Clematis St., Suite 200 |                                             |
| CITY - ST-ZIP  | West Palm Beach, FL 33401         |                                             |
| TITLE          | EV                                |                                             |
| NAME           | Fernandez, Luis J.                |                                             |
| STREET ADDRESS | One North Clematis St., Suite 200 |                                             |
| CITY - ST-ZIP  | West Palm Beach, FL 33401         |                                             |
| TITLE          | V                                 |                                             |
| NAME           | Hernandez, Oscar R.               |                                             |
| STREET ADDRESS | One North Clematis St., Suite 200 |                                             |
| CITY - ST-ZIP  | West Palm Beach, FL 33401         |                                             |