

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # G45750

1. Entity Name
PINE ISLAND FARMS, INC.



FILED

08 OCT 21 PM 3:57

FLORIDA DEPARTMENT OF STATE
AT LAHASSEE, FLORIDA



Principal Place of Business
24405 SW 129 AVENUE
P.O. BOX 247
GOULDS, FL 33170

Mailing Address
24405 SW 129 AVENUE
P.O. BOX 247
GOULDS, FL 33170

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10162008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

59-2324339

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ROWE, CHARLES R.
1310 N. KROME AVE.
HOMESTEAD, FL 33030

Name

Eileen Weber, P.A.

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

9374 SW 212 Terr.

City

Cutler Bay

FL

Zip Code

33189

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 *Eileen Weber P.A. by Eileen Weber, as President* 10/15/2008
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PST
NAME WISHART, JACK ☐ Delete
STREET ADDRESS 8320 S.W. 164TH STREET
CITY-ST-ZIP MIAMI, FL

TITLE V ☐ Delete
NAME CHAFFIN, GARY L.
STREET ADDRESS 9264 SW 136 ST CIR
CITY-ST-ZIP MIAMI, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST D ☒ Change ☐ Addition
NAME G. LYNN CHAFFIN
STREET ADDRESS 7380 SW 113n Street
CITY-ST-ZIP Pinecrest FL 33156

TITLE ☒ Change ☐ Addition
NAME No Current Appointment
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 300137130977
STREET ADDRESS 10/21/08--01025--002 **61.25
CITY-ST-ZIP

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: *[Signature]* 10/15/2008 305 322 3746
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**LIST OF ALL OFFICERS AND DIRECTORS OF
PINE ISLAND FARMS, INC.**

Document # G45750

President, Secretary and
Treasurer

G. Lynn Chaffin
7380 S.W. 113th Street
Pinecrest, FL 33156
Daytime Phone: 305 322 3746

Director

G. Lynn Chaffin
7380 S.W. 113th Street
Pinecrest, FL 33156
Daytime Phone: 305 322 3746