


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # H31548
1. Entity Name
KATHERYN PENNINGTON FARMS, INC.



Principal Place of Business 14 CONWAY CT PALM COAST, FL 32137	Mailing Address 14 CONWAY CT PALM COAST, FL 32137
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DO NOT WRITE IN THIS SPACE



02132007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2465532	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**SANSBURY, BETTY JO N
14 CONWAY CT.
PALM COAST, FL 32137**

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DUBOIS, PATRICIA N 16249 45TH ROAD WELLBORN, FL 32094
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD BOUCHELLE, KAY N. 1906 N.W. 21ST ST. GAINESVILLE, FL 32605
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SANSBURY, BETTY JO N 14 CONWAY COURT PALM COAST, FL 32137
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CUMMINGS, KATHERYN E 2356 LINKS DR ORANGE PARK, FL 32003
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000640852
02/28/07-80085-006 150.00

**DO NOT WRITE
IN THIS SPACE**

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: Betty Jo N. Sansbury, Betty Jo N. Sansbury 2/12/07 386.447.7872
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #