FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H46585

OAK COUNTRY FARM, INC.

(6)

FILED
Mar 04 1998 8:00am
Secretary of State



					å Malle: Ablitt linker Stifft State (69)
Principal Plac	ce of Business	Mailing Address			
% JOSEPH MICHAEL MCHUGH % JOSEPH MICHAEL MI 7550 GRIFFIN ROAD 7550 GRIFFIN ROAD DAVIE FL 33314 DAVIE FL 33314		CHUGH	DO NOT WRITE IN 1	THIS SPACE	
DAVIE FL 33314 DAVIE FL 33314				3. Date Incorporated or Qualified	
				03/12/1985	
2. Principal F	Place of Business	2e. Mailing Address		4. FEI Number	Applied For
21 26				59-2532717	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		S. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes or has paid th	e current year Intangible Yes No
24	9. Name and Address of Curre	29	30]	Personal Property Tax due June 30. 10. Name and Address of New Register 11. Personal Property Tax due June 30.	100 100
	CHUGH, JOSEPH MICHAEL	ant Registered Agent	81 Name	(U. TERRITO BING AUGUSTON OF THE TRANSPORT	
11. Pursuant office or	CALPIN FL 32062 I to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with, and accept the obli	to of Florida. Such change was	84 City Ites, the above-named authorized by the corp	AVIE corporation submits this statement for the purporation's board of directors. I hereby accept the	FL 85 Zip Code 33331 Dise of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	agent and tille if applicable (NC	OTE Registered Agent signature	reduced and are reducing?	ATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PO	☐ DELETE	1.1 TITLE	P.D	Change
NAME	MCHUGH, JOSEPH MICHAE	:L	1.2 NAME	mc itught Joseph	michael
STREET ADDRESS	8979 170 TERRACE		1.3 STREET ADDRESS	7550 GRIPPIN RO DAVIE FLA 33	AD
CITY-ST-ZIP	MOALPIN FL-	DELETE	1.4 CITY-ST-ZIP	DAVIE FLA 33	Change Additio
TITLE		☐ DELETE	2.1 TITLE		
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Additio
TITLE			3.2 NAME		
NAME			3.2 HAVIEL		
			2.2 STREET ANDRESS		
STREET ADDRESS			3.3 STREET ADDRESS		
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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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.