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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # H59008 (3) 1. Corporation Name TROY COBB & SONS, INC.										
Principal Place of Business STATE FARMER'S MARKET, UNIT 14 P O BOX 576										
WAUCHULA	FL 33873	•	VAUCHULA FL 3387	3			3. Date Incorporated or Qualified 05/28/1985	3a . Da	te of Last 04/26/	
Principal Plac	ce of Business	2a. M	failing Address			. ,	4. FEI Number 59-2534221		 	Applied For Not Applicable
Suite, Apt. #	, etc.	S	uite, Apt. #, etc.				5. Certificate of Status Desired		•	5 Additional Required
City & State		27 C	City & State				Election Campaign Financing			00 May Be
		28		1 -			Trust Fund Contribution		Ad:	ed to Fees
Zip	Country 25	29 Z	lip	Coun	try		This corporation has liability fo Florida Statutes	r intangible is DNo	tax under	s 199.032,
	9. Name and Address of Curre	ent Register	red Agent		Na I No.		10. Name and Address of New	Registere	d Agent	
COBB, TROY LEE				[81 Name					
619 EAST SUMMITT STREET WAUCHULA FL 33873					B2 Stree	t Addre	dress (P.O. Box Number is Not Acceptable)			
					B3					
				-	B4 City				85	Zip Code
								F		registered office
		22 and 607 f	1500 Florido Statut	oc the obou	o namod	COMPAR	ation pulpoits this statement for the n			
or registere	o the provisions of Sections 607.050 ad agent, or both, in the State of Flo a, and accept the obligations of, Sec	rida. Such d	hange was authoriz	red by the co	e-named orporation	corpora 's boar	ation submits this statement for the p d of directors. I hereby accept the ap	opointment a	as registe:	ed agent. I am
or registere familiar with SNATURE	nd agent, or both, in the State of Florence, and accept the obligations of, Sec	rida. Such d ction 607.05	hange was authoriz 05, Florida Statutes	red by the co	orporation	s boar	a of directors. I hereby accept the ap	ponimeni a	as registe:	ed agent. I am
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SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR